

605 Cocoa Ave, Hershey, PA 17033 - (717) 533-2002 - www.leaderactivelife.org

NEW MEMBER REGISTRATION

Last Name _____ First _____ Middle (Initial) _____

Phone Number (Home) (____) _____ (Cell) (____) _____

E-mail (print) _____ Birthdate _____

ADDRESS:

Street _____ Apt # _____

City _____ Twp _____ State/Zip _____

(Spouse- only if joining)

Last Name _____ First _____ Middle (Initial) _____

Phone Number (Home) (____) _____ (Cell) (____) _____

E-mail (please print) _____ Birthdate _____

EMERGENCY CONTACT (Required)

Name _____ Phone (____) _____

Relationship to member _____

ANNUAL CONTRIBUTION:

Tax Deductible Contribution: (circle one) \$100.00 (single) OR \$200.00 (couple)

Additional Tax Deductible Contribution: _____

Total Contribution: _____

(Leader Active Life runs solely on member contributions and fundraising. Any extra you can give directly benefits the Leader Active Life's programming and operating costs. Scholarship funds available.)

----- **OFFICE USE ONLY BELOW** -----

Check Number _____ CC _____ Cash _____ Date Donated _____