



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 _____

FOR NEW MEMBERS: HOW DID YOU HEAR ABOUT US? _____

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 _____

Membership Application 2024