

EMPLOYEE NAME: _____

Date of Birth _____ Age _____

Primary Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Email _____

FAMILY MEMBERS(S)

Name _____

Date of Birth _____ Age _____ Relationship _____

Name _____

Date of Birth _____ Age _____ Relationship _____

Name _____

Date of Birth _____ Age _____ Relationship _____

Name _____

Date of Birth _____ Age _____ Relationship _____

Name _____

Date of Birth _____ Age _____ Relationship _____

***Corporate Memberships for:
West Branch Local Schools***

- *All payroll deduction memberships will automatically renew unless the employee notifies the Salem Community Center of a request to terminate the membership (after initial 12 month commitment).*
- *Changes/additions can only be made through the Salem Community Center.*
- *Employees may only enroll at the Front Desk at the Salem Community Center.*
- *Free childcare for children ages 1-3 for those children listed on the membership.*
- *Free Fitness Floor Youth Certifications (\$25 value).*
- *Children ages 16-17 can have supervising privileges of their younger siblings ages 9 and up.*
- *A membership freeze (minimum 1 month/maximum 3 months) can be done once per membership year.*

Office Use Only

Start of Membership _____ Expiration Date _____ **Continuous** _____

Receipt # _____ Amount _____ Check No. _____ Cash _____ MC _____ Visa _____ Disc _____