

## Kahnawake Youth Center – Membership Form

### Please Fill in Information

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Box #:** \_\_\_\_\_ **Male**  **Female**

**Phone #:** \_\_\_\_\_ **Emergency #:** \_\_\_\_\_

**Guardian/Parent Names:** \_\_\_\_\_

**Allergies/Medication:** \_\_\_\_\_

**Medicare#:** \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_

**Email:** \_\_\_\_\_

### Membership Rates

**KYC 6 to 18 yrs - \$30.00**  
**19 yrs & over - \$50.00**

**Child Plan (3 or more kids) – \$75.00**  
**Family Plan (parents & children) - \$120.00**  
**Fitness (monthly) - \$10.00**

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### **Administration Use Only**

**Date:** \_\_\_\_\_

**Receipt:** \_\_\_\_\_

**KYC (yearly):** \_\_\_\_\_

**Fitness (monthly):** \_\_\_\_\_

**Aerobics (seasonal):** \_\_\_\_\_

**Amount Paid:** \_\_\_\_\_

**Cash/Cheque (please circle):** \_\_\_\_\_

**Staff Name:** \_\_\_\_\_