

## 2024 Spring Junior Registration

Juniors Name \_\_\_\_\_ Age \_\_\_\_\_

Parents name \_\_\_\_\_

Email address \_\_\_\_\_

Phone \_\_\_\_\_ (cell # for texting)

Member # \_\_\_\_\_ \$125. Per month

Non- member \$150. Per month

Credit card # - \_\_\_\_\_

Exp.date. \_\_\_\_\_ CVC \_\_\_\_\_ Zip code \_\_\_\_\_

This is a Three month program for March, April, & May. Your membership account or Credit Card will be charged at the beginning of each month.

Signature \_\_\_\_\_

Send registration form to [procraig1@gmail.com](mailto:procraig1@gmail.com). No phone calls

Circle the day you want to participate

Tuesday 4:00-5:00. (5,6,7) Wednesday 4:00 - 5:00 (5,6,7)

Wednesday. 5:30 -6:30. (8 to 13) Thursday. 5:30 -6:30. (8 to 13)