



Youth Center Inc.

Serving Youth and Families of Northern Berkshire

Membership Form 2022-2023

Full Year Membership: _____ Individual (\$50) _____ Family (\$75.) _____ Number in Family

A. Youth Member Information:

First Name _____ Last Name _____ Middle _____

Phone Number _____ Email _____ Date of Birth _____ Grade _____

Address (City, State & Zip Code) _____

Please list any special information or interest you may have:

B.
First Name _____ Last Name _____ Middle _____

Phone Number _____ Email _____ Date of Birth _____ Grade _____

Address (City, State & Zip Code) _____

Please list any special information or interest you may have:

C.
First Name _____ Last Name _____ Middle _____

Phone Number _____ Email _____ Date of Birth _____ Grade _____

Address (City, State & Zip Code) _____

Please list any special information or interest you may have:

D.
First Name _____ Last Name _____ Middle _____

Phone Number _____ Email _____ Date of Birth _____ Grade _____

Address (City, State & Zip Code) _____

Please list any special information or interest you may have:

Membership form 22-23 (Page 2)

Parent/Guardian Information

(In case of an emergency parent/guardian is contacted first)

Name Address Home Phone Daytime Phone

Employer Address Hours and Days at Work

Name Address Home Phone Daytime Phone

Employer Address Hours and Days at Work

Parent(s)/Guardian(s) email address: _____

Emergency Information

(Information other than a parent/guardian in case they cannot be reached first -Must be filled out -)

First Name Last Name Middle

Phone Number Relationship to Member

Address (City, State & Zip Code)

First Name Last Name Middle

Phone Number Relationship to Member

Address (City, State & Zip Code)

I give permission for my child's picture/video to be taken and published? YES _____ NO _____

Is anyone specifically denied permission to see or pick up the child?

Does child(ren) (name which one) have any unusual eating habits, food dislikes or allergies?

My signature indicates that I have read, understood and agreed with the Membership Policies of the Youth Center Inc. I understand that all members participate in all programs at their own risk. I agree to hold the Youth Center Inc. harmless from all claims related thereto.

Member Signature Date

Parent/Guardian Signature (if child under 18) Date