

HELENA FAMILY YMCA

1200 North Last Chance Gulch

(406) 442-9622



Name (please print): _____

Age: _____ DOB: _____ M / F

Parent's Name (if under 18): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Number in Family: _____

Employer: _____

Work Phone: (_____) _____ E-mail: _____

School (if signing up for youth program): _____

Grade: _____ Free / Reduced Lunch Program Y / N

Type of Membership

- Family (see back) SP Family Adult Senior Couple Senior
 Student Youth

How did you hear about us?

- Current Program Participant Direct Mail Employer Friend Yellow Pages
 Medical Reference Member TV / Newspaper / Radio
 Other _____

What was your reason for selecting a membership at the YMCA? _____

Check areas of interest

- Cardio/Strength Equipment Family Programs Senior Programs Teen Programs
 Children's Programs Fitness Classes Social Activities Volunteering
 Court Sports Gym Swimming Other _____

Program Registration

Check program registering for:

- Aerobics Camp Child Judo Soccer Track
 Art Club Cross Country Karate T-Ball Volleyball
 Babysitting Day Camp Swimming Teen Fitness Wrestling
 Basketball Golf Swim Team Tennis Y Adventure Guides
 Other _____

Would you like to be a Coach? Y / N

Signature: _____ Date: _____

Emergency Contact: _____ Phone: (_____) _____

The Helena Family YMCA is a non-profit organization dedicated to building self-esteem and enriching spirit, mind, and body for all persons of all ages and economic levels. No one will be denied the opportunity to be involved in any of the YMCA's programs, if you need financial assistance please speak with someone at the Membership Services Desk.

• *The Helena Family YMCA is not responsible for any injuries that may occur during exercising.*•

REGISTRATION



For Family Membership only, please list family members.

Name: _____ Birth Date: _____ M / F

Name: _____ Birth Date: _____ M / F

Name: _____ Birth Date: _____ M / F

Name: _____ Birth Date: _____ M / F

Name: _____ Birth Date: _____ M / F

Name: _____ Birth Date: _____ M / F

A Family, at the YMCA, is defined as all legal residents of a household and/or persons claimed as deductions with the Internal Revenue Service.

For Office Use Only:

Date	Amount	Receipt #	Bank Draft Rate	Staff Member Initial	Expiration Date

Cancelling Bank Draft

(Member's signature is required below in order to cancel, unless we receive a written letter):

Member's Signature

Date

Effective Date of Cancellation



Helena Family YMCA
1200 North Last Chance Gulch
Helena, MT 59601
(406) 442-9622

or visit us on the web at www.helenaymca.com