

**WHITESBURG RECREATION ASSOCIATION
MEMBERSHIP APPLICATION**

APPLICANT INFORMATION

Member #:		
Name:		Phone:
Current address:		
City:	State:	ZIP Code:
Email:		

EMERGENCY CONTACT

Name:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		

MEMBERSHIP PRIVILEGES TO INCLUDE

(MUST LIVE IN SAME HOUSEHOLD AS MEMBER)

Name:	Name:
Name:	Name:

SPECIAL SKILLS OR TALENT

(ELECTRICAL, LANDSCAPING, PAINTING, PLUMBING, ETC.):

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PAYMENT INFORMATION

Name on Check:	Check #:
Signature of applicant:	Date:

Make checks payable to:
Please mail your check to:

Whitesburg Recreation Association
610 Sanders Road
Huntsville, AL 35802