



# Zebulon Parks & Recreation Youth Fitness Room Membership

## Participant Information

Name of Participant: \_\_\_\_\_

Sex: Male Female (please circle one) Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Time Telephone: \_\_\_\_\_ Night Time Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**For Wake County Human Services Community Development Block Grant purposes, please use the following information to answer the question below.**

<b>Family Size</b>	1	2	3	4	5	6	7	8
<b>Household Income</b>	\$42,500	\$48,550	\$54,600	\$60,650	\$65,550	\$70,400	\$75,250	\$80,100

**Does your household income fall above or below the amount stated for your family size?**

Above                      Below                      **(please circle one)**

I, the parent/guardian of the above named minor applicant for Fitness Room privileges do hereby grant my permission for the use of the Zebulon Community Center Fitness Room under the following guidelines:

- All minors ages 14-17 must have a parent/guardian appear on site to complete this membership form prior to Fitness Room participation.
- Minors ages 14-15 must be accompanied by an adult at all times while using the Fitness Room.
- All minors must have an up to date and accurate membership registration form.
- Minors Ages 16-17 must have written permission hand in to the Community Center with this form turned in by the parent/guardian.

The undersigned agrees that he/she will exert considerable effort to encourage the above named minor to comply with all rules governing the child's use of the Zebulon Community Center, understand that the child's failure to comply may result in forfeiture of privileges and fees, and acknowledge my responsibility and my child's proper use of all Fitness Room Equipment.

## Release & Waiver

Knowing the above named youth's physical and health conditions, I hereby assume all risks and hazards incidental to the conduct of the activities at hand. I hereby release the Town of Zebulon and its employees from any and all damages on behalf of the above named person. I hereby give the above named youth my permission to participate and be involved in the Zebulon Community Center Fitness Room. Pictures or video clips may be taken while participating in Town of Zebulon programs. I give my permission to the Town of Zebulon to use such photos and videos in promotional, news, or informational media.

Parent/Guardian Signature: \_\_\_\_\_

Youth Signature: \_\_\_\_\_ Date: \_\_\_\_\_