



Registration Form

Mask is required, No admittance without it

Date: ___/___/___ Club: _____

Information needed for records:

Name of Clubber: _____

Address: _____

City: Zip Code: _____

Age: _____ Birthday: ___/___/___ Grade: _____ M___ F___

Home Phone:() _____ Cell Phone:() _____ Other Phone:() _____

Email (Print): _____

Parent / Guardian: _____

Do you attend Patchogue Baptist Church? Y / N: _____

If not, where do you attend church? _____

Brought by? _____

Additional Information: _____

Brother(s)/ Sister(s) in Club:

Name: _____

Name: _____



Dues: \$12 \$12 \$22 \$22 \$32

Uniform: \$12 \$12 \$12 \$16 N/A

Handbook: \$10 \$10 \$10 \$10 \$10

Dues

Handbook

Uniform

Date

Amount: _____

Amount: _____

Amount: _____

Total Amount: _____

Date Received: _____