

Community _____
Alumni _____
Senior _____

Emmanuel College – Athletic Center

706-245-2917

Family Membership Enrollment Form

(Member, spouse, and eligible dependents)

Date _____

New Renewal

Membership ID # _____

Member Name (Please print)

Gender (circle one): Male Female

Last Name

First Name

Date of Birth (mm/dd/yy)

Address

City

State

Zip Code

Day Phone

Cell phone

Email

Emergency Contact

Last Name

First Name

Relationship

Primary/Cell Phone

Spouse:

Gender (circle one): Male Female

Last Name

First Name

M.I.

Date of Birth (mm/dd/yy)

Day Phone

Cell phone

Email

Dependent:

Gender (circle one): Male Female

Last Name

First Name

M.I.

Date of Birth (mm/dd/yy)

Dependent:

Gender (circle one): Male Female

Last Name

First Name

M.I.

Date of Birth (mm/dd/yy)

Dependent:

Gender (circle one): Male Female

Last Name

First Name

M.I.

Date of Birth (mm/dd/yy)

Children under 16 years of age are not allowed on any cardiovascular or weight room equipment and must be accompanied and actively monitored by a parent/guardian in all areas of the Athletic Center – AT ALL TIMES.