

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

YMCA of the Greater Twin Cities

Service Matters Membership Application

Title (Mr., Ms.) First M.I. Last Address City State Zip Birthdate / Gender M F Home Phone Mobile Phone Email	
Birthdate / Gender M F Home Phone Mobile Phone Email Have you ever been a YMCA of the Greater Twin Cities member? Yes Employer Ethnicity: American Indian or Alaska Native Asian Black or African American Hispanic or Latino Image: Native Hawaiian or other Pacific Islander Two or more Races White Prefer not to give EMERGENCY CONTACT INFORMATION Name Phone ADDITIONAL ADULT Title (Mr., Ms.) First M.I. Last Birthdate / Gender M F Phone Employer Employer EMILDREN (Family members must be claimed as dependent on primary adult's tax returns)	
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AGREEMENT

By signing this agreement, I agree and acknowledge that this 20% discount is only valid for six months of membership. This temporary discount is made available through grant funding and has limited availability. After six months, my membership will automatically renew to a regular membership and I will be fully responsible for the amount due.

Applications will be reviewed on a first come first serve basis and submitting the Service Matters membership application does not guarantee approval of the discount.