2012 Gym & Fitness Center
membership

OFFICE USE:
Paid: Y N Cash or Check # _____
Amount: Free - Senior Walkers or Staff
$50 - Single $85 - Family
$50 - Senior 65+ (Single or Family)
Initials: _____

Primary Member Information

Name | Birth Date | Age | Gender

Home Address | City/State/ZIP

Phone (Home) | Phone (Work) | Phone (Cell)

Email

In case of emergency please contact:

Name | Phone

Please indicate below additional family members to be included in the membership:

Name	Birth Date	Age	Relationship

Submit a completed form and signed waiver along with your payment (cash or check made payable to Connection Pointe) at the Gym & Fitness Center check-in area or mail to:

Connection Pointe Christian Church
Attn: Gym & Fitness Center
1800 North Green Street
P.O. Box 667
Brownsburg IN 46112

Connection Pointe
CHRISTIAN CHURCH OF BROWNSBURG

cpccweb.org