

# WRRFC

## REGISTRATION FORM



NAME (PARENT) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE # \_\_\_\_\_

EMAIL \_\_\_\_\_

### CHILDREN

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDAY \_\_\_\_\_

NAME	CLASS	DAY	TIME	START DATE	MEMBER FEE	NON-MEMBER FEE	TOTAL

*\*Ask about our 10% sibling discount\**



**WESTERN RESERVE RACQUET AND FITNESS CLUB**

11013 Aurora Hudson Rd, Streetsboro, OH 44241 [WWW.WRRFC.COM](http://WWW.WRRFC.COM)

NAME	CLASS	DAY	TIME	START DATE	MEMBER FEE	NON-MEMBER FEE	TOTAL

NAME	CLASS	DAY	TIME	START DATE	MEMBER FEE	NON-MEMBER FEE	TOTAL