



New Member Application

Name _____
 Spouse Name _____
 Street Address _____
 City _____ State _____ Zip _____
 Primary Email _____
 Secondary Email _____
 Primary Phone Number _____
 Secondary Phone Number _____

Please list your dependents:

NAME	Birth Year	CIRCLE ONE
		Male / Female
		Male / Female
		Male / Female
		Male / Female
		Male / Female

This agreement allows for a discount for first year members. Subsequent years will be charged at regular price, which is set by the Board annually. Penn Valley Athletic Club will not issue refunds.

Type of Membership (Select One):

- Single** - ~~\$300~~ \$250 One individual, age 18 or older.
- Double** - ~~\$375~~ \$275 Two people in the same household, at least one of whom is age 18+.
- Family** - ~~\$475~~ \$350 All members living in the same household, at least one of whom is age 18+.

Optional Add-ons:

- Babysitter** - \$100 Babysitter Name _____
- Wireless Internet** - \$25 Members will receive a new access code each year. 5 device limit.

*Payments must be made in full in order to allow entry to the facility.

*Checks made payable to **Penn Valley**.

*Submit your payment and this form to the front desk upon your first visit to Penn Valley Athletic Club.

Referred by a Member? Name _____