

THE RADBURN ASSOCIATION

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POOL BADGE REGISTRATION FORM

PLEASE REMEMBER PHOTOS HAVE TO BE TAKEN!!

PLEASE PRINT CLEARLY

HOUSEHOLD LAST NAME: _____

FIRST NAME: _____

ADDRESS: _____

PLEASE CIRCLE ONE ADULT CHILD(UNDER 7) CHILD(OVER 8-13) CHILD(14-17) GUEST

GENDER: MALE ____ FEMALE ____

EMERGENCY PHONE: _____

MOBILE: _____

E-MAIL: _____

PLEASE PRINT CLEARLY

HOUSEHOLD LAST NAME: _____

FIRST NAME: _____

ADDRESS: _____

PLEASE CIRCLE ONE ADULT CHILD(UNDER 7) CHILD(OVER 8-13) CHILD(14-17) GUEST

GENDER: MALE ____ FEMALE ____

EMERGENCY PHONE: _____

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E-MAIL: _____

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E-MAIL: _____