



Sanibel Recreation Center
239.472.0345

Membership Application

Pass Type: Day Week Six Month Annual Lifetime

Primary Member

Name _____	
Address _____ _____	
Home Phone _____	Cell Phone _____
Work Phone _____	Email _____
Birth Date _____	
Resident Status (Check One) Resident <input type="checkbox"/> On Island Employee <input type="checkbox"/> Resident <input type="checkbox"/>	

Additional Members in Primary's Household

Name _____	
Email _____	Birth Date _____

Name _____	
Email _____	Birth Date _____

Name _____	
Email _____	Birth Date _____



Additional Members in Primary's Household (Cont.)

Name _____	
Email _____	Birth Date _____

Name _____	
Email _____	Birth Date _____

Name _____	
Email _____	Birth Date _____

Emergency Contact Information

Name _____	
Address _____	

Home Phone _____	Cell Phone _____
Work Phone _____	Relation _____

I affirm that no one listed on this application is a convicted sexual predator and that all household members will comply with the Sanibel Recreation Center Code of Conduct. Providing false or misleading information may result in revocation of membership.

Signature

Date

Bring your completed application and photo ID to the Sanibel Recreation Center,
3880 Sanibel-Captiva Road. Start living FIT-4-LIFE today!