

# **CYI Teen Center Membership Renewal 2025-26**

Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Birthday: \_\_\_\_\_

Contact Information Changes:

1. \_\_\_\_\_

2. \_\_\_\_\_

Emergency Contact Information Changes:

1. \_\_\_\_\_

2. \_\_\_\_\_

Authorization Changes: (Photos, Skate Park & Computers)

1. \_\_\_\_\_

2. \_\_\_\_\_

Parents Signature: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Phone Numbers: Home # \_\_\_\_\_

Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Cost: \$24.00/Year Date: \_\_\_\_\_