

Discover Membership Enrollment Form (For First Time Parents)



Your membership includes the benefits of a Family Membership

*If you would like to add additional adult members (named caregivers) you may do so for an additional charge.

Adults included with Membership:

Adult 1:

Name: _____

Primary Phone: _____

Email: _____

Adult 2:

Name: _____

Primary Phone: _____

Email: _____

Household Address: _____

Child's information

Child's Name: _____

Date of Birth: _____

This membership will expire when your child reaches 18 months of age.

Membership Expiration Date: _____

*All SPARK memberships are non-transferable and non-refundable

I understand that only those in my household that are listed on my membership will be included on this membership. Additional guests (children and adults) must pay general admission or use a guest pass.

I understand that all member adults will be asked to show a valid ID when checking in with this membership.

Signature: _____

Date: _____

Named caregiver on membership - \$40 per caregiver, limit two

Caregiver 1: (Additional \$40)

Name: _____
Primary Phone: _____
Email: _____
Address: _____

Caregiver 2: (Additional \$40)

Name: _____
Primary Phone: _____
Email: _____
Address: _____

Staff Use

Sold Membership Initial: _____ Date: _____	Completed in Altru Initial: _____ Date: _____
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