

The Southern Vermont Recreation Center  
*...Building Together...*

Teen members (14-17) are welcome to use the Fitness Center with parental/guardian permission and the permission of the Fitness Director.

Name of Teen \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_\_

Home Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Name of School \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell or Work Phone \_\_\_\_\_

I understand that this is a privilege, which the SVRC may revoke at any time that the privilege is abused or that inappropriate behavior is displayed. Should injury result from inappropriate use of the facilities, I understand that the SVRC is not to be held responsible. I agree to abide by the rules and regulations of the Southern Vermont Recreation Center.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Teen

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Director

\_\_\_\_\_  
Date