



Membership Invoice

Concord Recreation
 498 Walden Street
 Concord, MA 01742
 T: 978-287-1000
 F: 978-287-1011

Your membership will automatically renew in the month of _____.

Please complete this form and return it with payment in the enclosed self-addressed stamped envelope before _____.

Membership Type

Please circle membership type

Concord Carlisle Residents	Adult	Couple	Family	60+ Adult	60+ Couple	14+ Student
Fitness and Swim	\$840	\$1330	\$1590	\$615	\$1005	\$615
Swim	\$740	\$1190	\$1390	\$540	\$880	\$540
Fitness	\$740	\$1190	\$1390	\$540	\$880	\$540
Non-Resident Rates	Adult	Couple	Family	60+ Adult	60+ Couple	14+ Student
Fitness and Swim	\$940	\$1430	\$1790	\$715	\$1115	\$715
Swim	\$840	\$1290	\$1490	\$640	\$980	\$640
Fitness	\$840	\$1290	\$1490	\$640	\$980	\$640

List Members

Name	M / F	Date of Birth
first mi last		
Address		
street town zip		
Phone	E-mail	
<hr/>		
Name	M / F	Date of Birth
spouse		
Name	M / F	Date of Birth
child		
Name	M / F	Date of Birth
child		
Name	M / F	Date of Birth
child		
Name	M / F	Date of Birth
child		

Payment Options

Full Payment Made with check or credit card
 Installment Payment Made with credit card only (10 payments/10% processing fee)

\$ Amount Enclosed

Check Make checks payable to the Town of Concord
 Credit Card




Card Number

Exp. Date / V-Code

Name on Card

Signature Date

I agree to the membership terms and conditions on the reverse side of this form.