

**MANSFIELD COMMUNITY CENTER
MONTHLY APPLICATION**

The following fee schedule shall apply:

- Family - \$39 per month
- Adult Couple - \$35 per month
- Single Parent - \$32.50 per month
- Single Adult - \$28 per month
- Student 14 + - \$17.50 per month
- Student 8-13 - \$14.50 per month
- Senior Couple (60 & over) - \$31 per month
- Single Senior (60 & over) - \$20 per month

Type of Membership

- Family
- Adult Couple
- Single Parent
- Single Adult
- Student 14+
- Student 8-13
- Senior Couple (60 & over)
- Single Senior (60 & over)

Please list all members of the IMMEDIATE family living in the household (Family, Adult Couple and Senior Couple membership only). Number of persons in the immediate family_____

(Parents' names if under 17 years of age)

This is not a full membership to the Mansfield Community Center and does not include membership privileges. With this application, you will be given admittance to the weight room, aerobics room and gymnasium.

I agree to abide by all rules and regulations set forth by the Mansfield Community Center.

Signature: _____ Date _____

Address: _____

Phone: _____

Center Representative Signature _____ Date _____

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