



JOHN B. NORRIS
RECREATION CENTER

Norris Recreation Center Household Information Form

1050 Dunham Road, St. Charles, IL 60174

630-377-1405 • Fax 630-377-1462

Print all information neatly and carefully.

FOR OFFICE USE ONLY

Received By _____

Date _____

IMPORTANT

Return this form promptly. Form must be completed, if not previously submitted.

Proof of residency is required to guarantee that only residents living within Community Unit School District 303 boundaries receive discounted rates.

Complete all of the information below and return this form with a copy of a current utility bill, driver's license or state ID to:

**Norris Recreation Center, 1050 Dunham Road, St. Charles, IL 60174 or
E-mail to nrc@stcparks.org**

Main Contact - Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Primary Phone _____ - _____ - _____ Secondary Phone _____ - _____ - _____

E-mail _____ Birthdate ___ / ___ / ___ Sex M F

Household Members at address above:

Last Name	First Name	Birth Date	Sex
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F
		___ / ___ / ___	<input type="checkbox"/> M <input type="checkbox"/> F

For easier registration, complete this form online at norrisrec.org