



Tualatin Hills Park & Recreation District

REGISTRANT INFORMATION FORM

PLEASE PRINT:

Household Primary Contact: _____ **Print Card**
Last Name First Name MI

Residential Address: _____ Apt #/PMB (if applicable)
City/State/Zip: _____ Date of Birth: ____/____/____

Mailing Address: _____ Apt #/PMB (if applicable)
(if different from residential address)
Mailing City/State/Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Fax: _____ Gender: Male Female

If you DO NOT reside within the Tualatin Hills Park District, but OWN property within the THPRD boundaries, you are entitled to In-District privileges. Please list property address below:

Property Address: _____ City/State/Zip: _____

ADULT SECONDARY

_____ Gender: Male Female **Print Card**
Last Name First Name MI

Date of Birth: ____/____/____ Work Phone: _____

HOUSEHOLD (Additional household members over 21 years of age are required to provide residency information)

_____ <input type="checkbox"/> Print Card Last Name _____ First Name _____ MI Date of Birth: ____/____/____ <input type="checkbox"/> Male <input type="checkbox"/> Female	_____ <input type="checkbox"/> Print Card Last Name _____ First Name _____ MI Date of Birth: ____/____/____ <input type="checkbox"/> Male <input type="checkbox"/> Female
---	---

_____ <input type="checkbox"/> Print Card Last Name _____ First Name _____ MI Date of Birth: ____/____/____ <input type="checkbox"/> Male <input type="checkbox"/> Female	_____ <input type="checkbox"/> Print Card Last Name _____ First Name _____ MI Date of Birth: ____/____/____ <input type="checkbox"/> Male <input type="checkbox"/> Female
---	---

PLEASE NOTE:

The Tualatin Hills Park & Recreation District (THPRD) does not forward any mail. Returned cards are subject to verification, and in-district privileges may be withheld until the address can be verified. Residency form must be processed in person at THPRD facilities. THPRD reserves the right to verify residency without notice. Completed forms may be brought to any THPRD facility with the following **Required Residency Verification**:

- Current Oregon Drivers License or DMV Identification Card
- **AND**
- A current utility bill, lease agreement, credit card statement, insurance card or property tax statement

OFFICE USE ONLY	
<input type="checkbox"/> Renewal	<input type="checkbox"/> New <input type="checkbox"/> Update
_____ THPRD ID#	
_____ DATE PROCESSED	_____ ASSESSMENT
_____ NAME	