

ASPIRe NY, inc.



Autism Spectrum Peer Integration & Recreation

APPLICATION _____

RECREATION YEAR: _____

PLEASE FILL OUT, SIGN, AND MAIL WITH INITIAL REGISTRATION FEE AND/OR FIRST INSTALLMENT:

NAME _____
ADDRESS _____
PHONE NUMBER (S) _____
EMAIL _____
DATE OF BIRTH _____

“I AGREE TO TRY TO COME TO MOST **ASPIRE NY, INC.** GROUP ACTIVITIES, BECAUSE I KNOW THAT THE GROUP NEEDS ALL OF IT’S PARTICIPANTS THERE TO BE A SUCCESS!”

PARTICIPATION DUES:

INITIAL REGISTRATION FEE (NEEDED FOR NEW PARTICIPANTS) IS \$25. TOTAL ANNUAL DUES: \$300 FOR 12 MONTH RECREATION PROGRAMMING.

INSTALLMENTS ARE AS FOLLOWS:

- **SEPTEMBER 1ST – INITIAL REGISTRATION FEE \$25 (IF A NEW PARTICIPANT) AND/OR FIRST MONTH’S DUES \$25**
- **OCTOBER 15TH – 1ST INSTALLMENT DUE \$150**
- **JANUARY 15TH – 2ND INSTALLMENT DUE \$125**
- **IF JOINING LATER IN THE SESSION, THE DUES WILL BE PRO-RATED.**

YOU MAY, OF COURSE, PAY THE ENTIRE ANNUAL FEE OF \$300 BY OCTOBER 15TH.

*WE CELEBRATE ALL OUR PARTICIPANTS’ BIRTHDAYS WITH A PARTY!!! WE ASK THAT A \$5.00 GIFT CARD TO THE STORE CHOSEN BY EACH PARTICIPANT BE GIVEN AT HIS OR HER PARTY.

PARTICIPANT/GUARDIAN SIGNATURE

DATE

MAKE CHECKS PAYABLE TO **ASPIRE NY, INC.**
MAIL TO:

JULIE MARKS, TREASURER
ASPIRE NY, INC.
15 CARLYLE TERRACE
SARATOGA SPRINGS, NY 12866