

Membership Application



Today's Date: _____ / _____ / _____

Member Information

Member's Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Country: _____

Phone Number: _____ Birthday (MM/DD/YY): _____ / _____ / _____

Parent's Email Address: _____

If this membership is a gift, please fill out the information below:

If you'd like to include a gift note, whom is the gift from? _____

Where would you like the Welcome Kit shipped? (if different than member's address)

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Country: _____

How did you hear about Jr. Power Pack? _____

Method of Payment: \$20 Annual Fee

- Check or Money Order payable to the Green Bay Packers
- MasterCard
- Visa

Credit Card Number: _____

3 Digit Security Code (back of card): _____ Exp Date: _____ / _____

Authorized Signature (for CC only): _____

Send registration form with payment to:

**Junior Power Pack
P.O. Box 10628
Green Bay, WI 54307**