



1050 West Wekiwa Road ~ Sand Springs, OK 74063 ~ (918) 246-2661

Case Card Application

Form "C"

Patrons wishing to access the gymnasium, walking track or the dance/aerobic room for recreational activities will be required to purchase a CASE Card annually. This Card will also allow patrons to "checkout" equipment at the front desk. Each Patron must possess **their** card while in the Center as they may be spot checked for possession of the CASE Card.

NAME: _____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ ALTERNATE#: _____

*EMAIL: _____

***If you would like to be contacted about facility events/classes/announcements, please include your email address.**

Do you have any medical conditions you would like us to know about?

- | | | | |
|---|----------|--------|-------|
| <input type="checkbox"/> Area User | \$25 | | |
| <input type="checkbox"/> Additional Card | \$10 | X_____ | _____ |
| <input type="checkbox"/> SS Resident | (1) FREE | | |
| <input type="checkbox"/> Additional Card | \$5 | X_____ | _____ |
| <input type="checkbox"/> Senior Citizen (55+) | \$5 | X_____ | _____ |
| <input type="checkbox"/> COSS Employee | (1) FREE | | |
| <input type="checkbox"/> Additional Card | \$5 | X_____ | _____ |
| <input type="checkbox"/> Replacement Card | \$5 | X_____ | _____ |

Total for individual/family/or other: _____ **TOTAL:** _____

Payment received by: _____ Cash Check Credit Card

I will agree to obey all the rules/regulations/policies set forth by the City of Sand Springs. I understand that if I disobey any of the rules outlined in the Case Community Center Policy Handbook, I may be dismissed from the facility for a short/long-term period.

Signature: _____

Date: _____