| aRTIST TEEBO TEEBORETTS Membership Application www.join-1.com | | | |
| --- | --- | --- | --- |
| Applicant Information | | | |
| Child Name: | | | |
| Date of birth: | Email: | | Phone: |
| Current address: | | | |
| City: | State: | | ZIP Code: |
|  |  | |  |
|  | | | |
| Current Memberships: | | | |
|  | | | How long? |
|  |  | |  |
|  |  | |  |
|  |  | |  |
| Emergency Contact | | | |
| Name of a relative not residing with you: | | | |
| Address: | | | Phone: |
| City: | State: | | ZIP Code: |
| Relationship: | | | |
|  | | | |
| Parent Name: | | | |
| Home: | Work Phone: | | C. Phone: |
|  | | | |
| List your Hobbies and Talents: | | | |
|  | | |  |
|  |  | |  |
|  |  | |  |
|  |  | |  |
|  | | | |
| Are you in Jazz/Dance/Cheer, etc.? List Below | Do you sing? | | Have you been bullied recently? |
|  |  | | If so, would you like to talk to someone? |
|  |  | |  |
| Instruments you play | | | |
|  | |  | |
|  | |  | |
| Signatures | | | |
|  | | | |
| Signature of applicant: | | | Date: |
| Signature of Parent: | | | Date: |

The ARTIST TEEBO JoinOne Anti-Bullying Organization mission is to promote a sense of self confidence, individuality and protect those susceptible to insults, harassment, and attacks by their peers through music, dance and education thereby enabling them to live a life free from fear and seclusion in their homes, schools, and public.

