



## Westlake Recreation Department New Household Information Form

We have a new online registration system, which will provide our participants with an additional method of registering for programs. Register for a class, view household history, and more, 24 hours a day.

In order to use this system, first time registrants must first submit a completed Household Information Form to the Westlake Recreation Department along with proof of residency (not required for non Westlake residents). You can email us your form to [recinfo@cityofwestlake.org](mailto:recinfo@cityofwestlake.org), mail it or drop it off in person to 28955 Hilliard Blvd, Westlake, OH 44145. Once we have received your completed form and proof, we will send you an email confirming receipt and provide you with a user name and password so that you may access our online registration system. **If all information on the form is not completed your household will not be added. By submitting this information, you are acknowledging that the information is correct.**

### *Primary Household Contact/Guardian*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Primary Email Address \_\_\_\_\_  
Date of Birth \_\_\_/\_\_\_/\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

### *Secondary Household Contact/Guardian*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Primary Email Address \_\_\_\_\_  
Date of Birth \_\_\_/\_\_\_/\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

### *Additional Household Members ( family members must reside at the same address- ages are subject to verification)*

- Dependent First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Date of Birth \_\_\_/\_\_\_/\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_
- Dependent First Name \_\_\_\_\_ Last Name \_\_\_\_\_

- Date of Birth \_\_\_/\_\_\_/\_\_\_                      Gender: Male\_\_\_ Female\_\_\_\_\_
- Dependent First Name\_\_\_\_\_ Last Name \_\_\_\_\_  
 Date of Birth \_\_\_/\_\_\_/\_\_\_                      Gender: Male\_\_\_ Female\_\_\_\_\_
  - Dependent First Name\_\_\_\_\_ Last Name \_\_\_\_\_  
 Date of Birth \_\_\_/\_\_\_/\_\_\_                      Gender: Male\_\_\_ Female\_\_\_\_\_
  - Dependent First Name\_\_\_\_\_ Last Name \_\_\_\_\_  
 Date of Birth \_\_\_/\_\_\_/\_\_\_                      Gender: Male\_\_\_ Female\_\_\_\_\_
  - Dependent First Name\_\_\_\_\_ Last Name \_\_\_\_\_  
 Date of Birth \_\_\_/\_\_\_/\_\_\_                      Gender: Male\_\_\_ Female\_\_\_\_\_

For office use only:

\_\_\_\_\_type of residency provided

\_\_\_\_\_Clerk Initials/ Date