

**BOROUGH OF HAMBURG  
2021 SEASON TICKET APPLICATION**

NAME OF APPLICANT: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY, STATE, ZIP: \_\_\_\_\_  
BOROUGH/TWP: \_\_\_\_\_ SCHOOL DISTRICT: \_\_\_\_\_  
HOME NUMBER \_\_\_\_\_ EMERG. # \_\_\_\_\_

NAMES OF PERSONS TO RECEIVE TICKET INCLUDING APPLICANT IF TICKET IS	ADULT	CHILD	AGE	DATE OF BIRTH

If you have a medical problem, please write information on the reverse side of paper with the name of the person and the problem.

**FALSIFICATION OF ANY INFORMATION WILL RESULT IN TERMINATION OF MEMBERSHIP  
NO REFUNDS ON SEASON MEMBERSHIP FEE**

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