

First Name *

Last Name

Email Address *

Confirm Email Address *

Re-type Email Address

Phone

Are you a resident in the county of Milwaukee? *

Yes

No

What is your residential zip code? *

Are you able to participate in/contribute to Program events and activities on a consistent basis? *

Yes

*Participation may be required for at least 60% of all occurrences during membership tenure.

Any comments or questions?

0 / 250

User Agreement *

By submitting this form, I the user, have read and agree with the [privacy policy](#) and [terms and conditions](#) of the website, as well as the [Membership Agreement](#).