

PLEASE PRINT

SUPERHERO'S NAME:

AGE: \_\_\_\_\_

TOTAL AMOUNT GIVEN:



PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN'S NAME: \_\_\_\_\_

PASTOR'S NAME: \_\_\_\_\_

CHURCH'S NAME: \_\_\_\_\_

PASTOR'S SIGNATURE: \_\_\_\_\_

MEMBERSHIP FORM AND MONIES MUST BE RECEIVED BY  
**APRIL 30, 2026** TO SECURE YOUR SUPERHERO CLUB STATUS