



HEALTHY LIVING STARTS HERE

YMCA of Austin Membership Application

A photo ID is required to apply for membership

PRIMARY MEMBER

INFORMATION				
Mr/Ms/Mrs	First Name	M.I.	Last Name	
Gender M or F	Birthdate / /	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed		
Mailing Address		City	State	Zip
Home Phone	Cell Phone	Email Address		
RACE				
<input type="checkbox"/> Caucasian/White <input type="checkbox"/> African American/Black <input type="checkbox"/> Alaskan Native <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other _____				
EMPLOYER INFORMATION				
Employer (if applicable)		Work Phone		
EMERGENCY CONTACT INFORMATION				
Name		Phone		

2ND ADULT (If applicable)

INFORMATION				
Mr/Ms/Mrs	First Name	M.I.	Last Name	
Gender M or F	Birthdate / /	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed		
Mailing Address		City	State	Zip
Home Phone	Cell Phone	Email Address		
RACE				
<input type="checkbox"/> Caucasian/White <input type="checkbox"/> African American/Black <input type="checkbox"/> Alaskan Native <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Other _____				
EMPLOYER INFORMATION				
Employer (if applicable)		Work Phone		
EMERGENCY CONTACT INFORMATION				
Name		Phone		

DEPENDENTS (Must live in household, ages 0-18 years, or age 23 if full-time student)

First Name	M.I.	Last Name	Birth Date	Gender M or F
First Name	M.I.	Last Name	Birth Date	Gender M or F
First Name	M.I.	Last Name	Birth Date	Gender M or F
First Name	M.I.	Last Name	Birth Date	Gender M or F
First Name	M.I.	Last Name	Birth Date	Gender M or F
First Name	M.I.	Last Name	Birth Date	Gender M or F

HOW DID YOU HEAR ABOUT THE Y?

Check All That Apply

- Friend/Current Member
- Place of Employment
- YMCA Website
- Radio
- Billboard
- Newspaper/Magazine
- Television

WHY DID YOU JOIN THE Y?

Check All That Apply

- Improve Overall Health and Wellness
- Lose Weight
- Training for Fitness Event
- Be Active with Family
- Live Healthy Lifestyle
- Meet People
- Build Strength and Endurance
- Safe and Healthy Place for Kids
- Improve Medical Condition

INTEREST AREAS

Check All That Apply

- Aquatics Programs/Pool
- Cardio Machines
- Child Care
- Family and Parent/Child Activities
- Group Exercise/Fitness Classes
- Preschool
- Senior Activities
- Strength Training & Weights
- Teen Activities
- Youth Sports & Activities

MEMBERSHIP TYPE

Choose One That Applies

- Adult Locker Room A
- Adult Locker Room B
- Family Locker Room A (Both)
- Family Locker Room A (One)
- Family Locker Room B (Both)
- Senior Locker Room A
- Senior Locker Room B
- Senior Couple Locker Room A (Both)
- Senior Couple Locker Room A (One)
- Senior Couple Locker Room B (Both)
- Youth Wellness Center
- Young Adult/Student

YMCA OF AUSTIN RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT & WAIVER

In consideration of participating in activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the YMCA of Austin and its owners, directors, officers employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and I agree to be bound by its terms.

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone (_____) _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT

(Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent/Guardian Signature _____ Print Name _____

Date _____

MEMBERSHIP AGREEMENT

Please read carefully and check each box showing that you understand the membership agreement.

- I understand that the YMCA of Austin requires a minimum of **2 FULL MONTHS** of membership paid in full before I can cancel my membership.
- If my membership dues are paid through credit card or electronic funds transfer, I understand this is a **continuous membership plan**. I will continue to be charged unless I come into the Y to cancel my membership. **If I cancel my membership I must visit the Y prior to the 26th** of the month to fill out a Membership Termination form if I wish to cancel my membership and stop the bank/credit draft for the next month.
- I understand a \$15 return fee will be charged for all refused/returned debit cards, credit cards or returned checks for any fees incurred at the YMCA of Austin in addition to any bank fees associated with the return.
- I understand that I will be **charged membership dues even if I do not utilize the facility** and will continue to be charged until I cancel my membership.
- I understand that all membership rates are **subject to change** and if and when that happens I will receive four weeks notice letting me know of the price change. I will then be charged those new rates through my continuous membership plan through my credit card, debit card or electronic funds transfer unless I cancel my membership.
- I understand it is **my responsibility** to notify the YMCA of any change in address, bank account information (if utilizing bank draft for payment of dues) or debit/credit card information/expiration date (if utilizing credit card for payment of dues).
- I understand that the **Joiner Fee is a one-time fee as long as I remain an active member** of the YMCA. If I choose to cancel or discontinue my membership for more than 30 days, a Joining Fee will be charged when I reapply for membership.
- I understand that cancelling my membership will **result in forfeiture** of any unapplied insurance reimbursement.
- I understand that membership dues are **not subject to refund** and that I will be **responsible for any outstanding balances** before I am able to cancel my membership.

I acknowledge the Membership Agreement set forth above.

Signature: _____ Date: _____

CODE OF CONDUCT

The YMCA of Austin is committed to providing a safe and welcoming environment for all members and guests. To promote this experience, we ask individuals to act appropriately at all times when they are in our facility or participating in our programs.

We expect persons using the YMCA to behave in a mature and responsible way to respect the rights and dignity of others. Our Code of Conduct does not permit any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct. Specifically, this includes:

- Angry or vulgar language including swearing, name-calling or shouting.
- Physical contact with another person in any angry or threatening way.
- Inappropriate attire. Appropriate attire must be worn at all times.
- Any demonstration of sexual activity or sexual contact with another person.
- Harassment or intimidation by words, gestures, body language or any other menacing behavior.
- Theft or behavior that results in the destruction of property.
- Carrying or concealing any weapons or devices or objects that may be used as weapons.
- Using or possessing illegal chemicals or alcohol on YMCA property, in YMCA vehicles, or at YMCA sponsored programs.
- Loitering is not permitted in or outside the YMCA.
- The YMCA and its property is a smoke-free environment. Smoking is not permitted in or outside the YMCA.
- Any other conduct of an inappropriate, threatening or offensive nature.

Members and guests are encouraged to be responsible for their personal comfort and safety and ask any person whose behavior threatens their comfort to refrain. If a member or guest feels uncomfortable in confronting the person directly, they should report the behavior to YMCA staff immediately. We want to help!

In order to be able to carry out these Code of Conduct standards, we ask that members and guests identify themselves to staff when asked, including presenting a photo ID.

Suspension or termination of YMCA membership privileges may result from a violation of the Code of Conduct. This will be determined by the Building Supervisor on duty and reviewed by the YMCA Executive Director.

I hereby acknowledge that I have read, understand, and agree to comply with the Code of Conduct standards of the YMCA of Austin, MN.

Signature: _____ Date: _____



PAYMENT AUTHORIZATION FORM

PAYMENT AUTHORIZATION

BANK DRAFT/ELECTRONIC FUNDS (EFT) OR DEBIT/CREDIT CARD AUTHORIZATION

I authorize my bank to honor pre authorized Electronic Funds Transfers (or credit card charges) against my account for membership/program/ contribution payments as indicated below. When the bank honors the EFT (or credit card) by charging my account, such transfer shall constitute notice of payment due and my receipt for the payment. Should a pre authorized EFT (or credit card) not be honored by said bank when received by them, it is then understood that the payment is to be made by me in the amount of said payment plus service charge. It is further understood that if such payment is not honored by the bank (or credit card institution), then the YMCA, at its discretion may resubmit the amount due for payment on a future date.

PAYMENT BY BANK DRAFT/EFT

OR

PAYMENT BY DEBIT/CREDIT CARD

I choose to utilize the EFT option for monthly payment (direct debit) from my checking account.

I choose to utilize the Debit/Credit Card payment option for my monthly payment (automatic charge to credit card).

Checking Account Savings Account

Card Type

Bank Name _____

VISA  DISCOVER  MASTER CARD 

Bank Address _____

Card Holder Name _____

Name on Account _____

Card Billing Address _____

Account Number _____

Account Number _____

Routing/Transit Number _____

Expiration Date _____

Authorized Signature _____

Authorized Signature _____

AUTHORIZATION AGREEMENT

- The YMCA Draft Membership is a continuous plan which automatically renews monthly unless I visit the YMCA of Austin and fill out a Membership Termination Form by the 26th of the month in order to stop debit/electronic funds transfer payment for the next month. Directly calling my bank, Credit Card Company or the YMCA of Austin will not cancel my monthly payment. (A minimum of two full months membership will be charged before cancelling.)
- The YMCA Board of Directors may, at their discretion, adjust the monthly rate applicable to my category of membership. I understand that I will receive at least four weeks notice prior to any such change. Annual membership fees will be adjusted at time of renewal.
- I understand that the YMCA of Austin does not issue refunds on YMCA memberships. In the event of a move or transfer, my YMCA membership will be transferred to the local YMCA.
- Should any payment not be honored by my bank/credit card company for any reason, I realize that I am still responsible for that payment plus a \$15 service fee applied by the YMCA. This is in addition to any service fee my bank or Credit Card Company may make.
- The YMCA of Austin reserves the right to terminate membership upon non-payment of fees.
- I will notify the YMCA of Austin of any change in status that will affect my membership (address, phone, Bank Account, credit card #, expiration date, etc.).
- I have read this agreement, I understand it, and I agree to it voluntarily.

Account Holder Signature _____ Date _____

**Attach Voided Check
(if applicable)**