

# Winona Family YMCA

## Membership Application and Agreement

Join Date \_\_\_\_/\_\_\_\_/\_\_\_\_

### Type of Membership

- Adult     Family     Single Parent Family     Retired Adult     Trial Membership     College Semester  
 Youth K     Youth 1     Youth 2     Youth 3     Youth 4     Youth 5     Youth 6     Youth 7     Youth 8  
 Youth 9     Youth 10     Youth 11     Youth 12

### Membership Payment

- Full Pay     Bank Draft     Financial Assistance

**\*\*Please Print**

**First Adult Information or Child:**

(01)  
 First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone (    ) \_\_\_\_\_

Address \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Gender M/F

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ e-mail \_\_\_\_\_

Employer/School \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_

**\*\*Emergency Contact\*\* Please indicate relationship (spouse, parent, etc.)**

Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_ Relationship \_\_\_\_\_

**Second Adult Information:**

(02)  
 First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone (    ) \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender M/F e-mail \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Employer/School \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_

**Dependent /Children's Information:**

	First Name and Middle Initial	M/F	Birthdate	Relationship	School	Grade
(03)	_____	___	____/____/____	_____	_____	_____
(04)	_____	___	____/____/____	_____	_____	_____
(05)	_____	___	____/____/____	_____	_____	_____
(06)	_____	___	____/____/____	_____	_____	_____

**Please Note:**

- a) If paying monthly using the automatic deduction as a convenient way to pay for my membership, and for any reason I wish to terminate or change the status of my membership, I must give the YMCA notice by the 15<sup>th</sup> of the month prior to my next month's withdrawal date.
- b) If prepaying, I understand that my membership is non-refundable. It may be transferable to another YMCA.
- c) I understand that the YMCA reserves the right to increase membership rates as necessary, with at least 30 days advanced written notice when using the automatic deduction for payment method.
- d) I understand that failure to comply with YMCA rules and policies may result in my exclusion from YMCA programs or areas of the facility, and that the YMCA reserves the right to terminate my membership privileges if I do not comply with YMCA rules.
- e) I understand that the YMCA makes no assessment of my health status or suitability in participating in any type of YMCA program or activity.
- f) Any person who supports the purpose of the YMCA may become a member of this organization in accordance with such provisions as may be established by the Board of Directors, and shall so continue to be a member unless the Board or its authorized agent concludes, in its sole discretion, that a member has failed to live up to the standards and commitments of being a member of the YMCA.
- g) Since it is contrary to the mission of the YMCA to be a sex offender, the YMCA will deny or revoke a membership to such a person. A no tolerance stance will be taken on all sex offenders. **Please Note:** The Winona Family YMCA cross references the National Sex Offender Registrant List, with all new YMCA members who join.

## RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

The undersigned is aware of the different types of activities, equipment, and facilities offered by the YMCA and is aware of the risks inherent in the participation in such activities and use of such equipment and facilities.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his/her personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any, loss, liability, damage or cost they may, incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Minnesota and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

**I have read and understand this Release of Liability and understand that I am assuming certain risk. I agree to all terms of this release and hereby sign it freely and voluntarily.**

Date: \_\_\_\_\_

x \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Adult #1

x \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Adult #2 (if applicable)

x \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Adult dependent #1

x \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Adult dependent #2

x \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_  
Adult dependent #3