Y

YMCA Membership Application

The YMCA is dedicated to the growth of all persons in spirit, mind and body and in a sense of responsibility to each other and the global community.

	elect Membership Ty r (60+) Couple /						
PRIMAR	RY MEMBER						
NAME	First	Middl	е		Last		
	D.O.B.	1			Gender Identity		
HOME	Street				City	City	
	Province	Posta	Code		Cell		
	Phone	Email					
WORK	Employer			Posi	ion/Occupation		
	Phone	Email	Email				
SECONE	DARY ADULT MEMBE	R or Parent	/Guardian for	applica	ants under 18 years		
NAME	First	Middl	e		Last		
	D.O.B.				Gender Identity		
WORK	Employer			Posi	ion/Occupation		
	Phone	Email					
DEPEND	DANTS						
First Name		MI	Last Name		D.O.B.	Gender Identity	
Medical	Information:						
EMERGENCY CONTACT (Other than in your household).		Name	Name		Phone ()		
Please se	elect Membership Pa	ıyment Opti	on: Upfront	t 🗌 PA	.C PAV Receipt #:		
I authoriz Strong Ki Voluntee For Office	ids Campaign Donatice the YMCA to add to do the YMCA t	he following \$5 \$10 sted in become	g amount to model in the second secon	y mont 50 eer plea	thly bank draft to sult of the control of the contr	pport the YMCA.	
Date Entered:		Date Fil	ed:		_Staff Initials:		

Terms & Conditions of Cumberland YMCA Membership

Member Etiquette: YMCA members, volunteers and staff pledge to treat one another with respect and dignity. A valid membership card must be presented each visit. Smoking is not permitted on YMCA property. I understand that membership to the YMCA is a privilege and may be revoked for conduct unbecoming a member as stated in the rules of the facility or at the discretion of the CEO. I further understand that membership dues are not refundable. It is my understanding that if I wish to terminate my membership in any way, I must give the YMCA written notice. I attest that all information provided on this application is true. I understand that falsifying information is grounds for termination of my membership.

<u>Property Loss:</u> The applicant(s) understands that YMCA is not responsible for personal property lost, damaged or stolen while using the YMCA facilities, including parking lots or participating in YMCA programs.

<u>Photograph Permission:</u> The applicant(s) hereby gives permission for the YMCA to use, without limitation or obligation, photographs, film footage or tape recording which may include the applicant(s) image or voice for purposes of promoting or interpreting YMCA programs.

<u>Medical treatment:</u> The Applicant(s) gives permission for the YMCA staff or volunteers to provide emergency medical treatment. The applicant(s) consents to medical treatment deemed immediately necessary.

<u>Payment Policy:</u> Membership can be paid by Cash, Cheque, Interact, Visa or Mastercard. Memberships can also be paid through PAC/PAVs (Pre-Authorized Chequing / Pre-Authorized Visa/Mastercard) with a one-time set up fee. Forms and additional information can be obtained at the Membership desk. Program fees must be paid upon request. In the event of insufficient registration, programs may be cancelled and fees refunded in full. Memberships are non-transferrable.

<u>Credits / Refund Policy:</u> A subsidized membership may be revoked if a member is found to be falsifying income information or abusing their membership privileges. Program fees are <u>non-refundable</u> after the first day of the program session. Please note that the first day of the program session is not always the first class of the session. NO credits, refunds, or make up classes will be issued for classes missed due to personal reasons. Please take into account all vacations, holidays, religious observances, and other personal activities prior to registering for classes. PAC registration fees, gift certificates, guest passes, and membership fees are non-refundable. For more detail regarding our policies please refer to the Cumberland YMCA Membership Handbook. A YMCA credit note will be issued when a medical excuse is presented and accompanied by a doctor's note. YMCA credits are applicable toward any YMCA program, are valid for one year from the date of issue but are not redeemable for cash. Cheques returned will incur a \$25 processing fee. No refunds will be made to those members who lose their membership privileges based on membership agreement or membership etiquette infractions.

Release of Liability/Participation: I am an adult age 18 or older and wish to participate in YMCA activities. In addition, if applicable, I give permission for my dependents to participate in YMCA activities. I understand that accidents can sometimes happen. Therefore, in exchange for the YMCA allowing me, and if applicable, my spouse and my dependents to participate in YMCA activities, I understand and expressly acknowledge that I release the YMCA, its employees, its boards, members, volunteers or guests from all liability for any injury, loss or damage connected in any way whatsoever to participation in YMCA activities whether on or off the YMCA's premises. I understand that this release includes any claims based on negligence, action or inaction of the YMCA, its employees, boards, members, volunteers or guests. For more detail regarding our policies please refer to the Cumberland YMCA Membership Handbook.

I have read and understand the	erms and Conditions of Cumberland YMCA Membership.
Signature:	Date: