



Military Non-Active/Veterans

Staff Initials _____

Date Received _____

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Richard G. Snyder YMCA Campus Membership Application

NEW RENEWAL CHANGE

First Name _____ Last Name _____ Sex _____

Address _____ City _____ Zip _____

Primary Phone _____ Do you allow SMS texts? YES NO Birth Date ____/____/____

E-mail Address _____

Emergency Contact _____ Relationship _____ Phone _____

First Name	Last Name	Age	Birth Date	Sex	Relationship
			/ /		
			/ /		
			/ /		
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Bank Draft Application for Richard G. Snyder YMCA Campus

First Name _____ Last Name _____ Middle _____

Bank Name _____

Routing Number _____ Account Number _____

Your First Draft will Be On: ____/____/____ Down Payment \$____.____ Monthly Draft Amount \$____.____

The Bank Draft payment plan is an authorization for the Y to draft a member's account for monthly membership payments. Membership will remain active and continue to draft until a Cancellation Form is filed at the Richard G. Snyder YMCA Campus. If filed before the 25th of the month the membership will terminate at the end of the month.

Drafts will be drawn on the **7th** of the month. If you join between the 1st-15th of the month, the first draft will be on the 7th of the next month. If you join between the 16th-31st of the month, the first draft will be on the 7th of the second month from joining date.

Membership holds will not be authorized unless medically necessary with official documentation from the Doctor and approval from the CEO.

Two consecutive insufficient fund transactions will result in termination of membership. A \$30.00 service fee for each insufficient fund transaction. All past dues and the Join Fee will be charged when the membership is reactivated.

An increase of up to 5% may be assessed each year and will be reflected in the October draft.

A ___% increase will take place yearly on ****October 1**** without notification.

Annual Memberships

Annual memberships will have an anniversary date of October. Bills will be mailed in September and balance will need to be paid by the end of October.

Memberships that lapse for 30 days or more will be assessed the Join Fee.

An increase of up to 5% may be assessed each year and will be reflected on your annual bill.

Membership Disclosure Statement

I swear/affirm that I have not been named a perpetrator of a founded report of child abuse, aggravated assault, or sexual abuse.

I understand that my membership will be terminated if I have been named as the perpetrator of a founded report of child abuse, aggravated assault or sexual assault.

I hereby swear/affirm that the information set forth above is true and correct. I understand the penalty for false swearing is a misdemeanor of the third degree pursuant to Section 4903(b) of the Crimes Code.

Signature _____ Date _____

Forms of Military ID

Military ID

Military Orders