



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Richard G. Snyder YMCA Campus

Household
 Single Household
 Adult
 2 Adults
 Senior Citizen
 2 Senior Citizens
 Youth
 Youth Multiple
 Special Needs Adult
 Special Needs Youth
 Military (Active/Veteran)
 NEW
 CHANGE
 Payment type:
 Annual Pay
 Bank Draft
 Credit Card

Staff: _____
Date: _____

Employer : _____
 First Name _____ Last Name _____ Sex _____
 Address _____ City _____ Zip _____
 Primary Phone _____ Do you allow SMS texts? YES NO Birth Date ____/____/____
 E-mail Address _____ Ethnicity: _____
 Emergency Contact _____ Relationship _____ Phone _____
 Why the Y?
 Fitness Classes
 Youth Sports
 Pool
 Equipment

First Name	Last Name	Age	Birth Date	Sex	Relationship
			/ /		
			/ /		
			/ /		
			/ /		
			/ /		
			/ /		

Bank Draft Application for Richard G. Snyder YMCA Campus

First Name _____ Last Name _____ Middle _____
 Bank Name _____ Routing Number _____ Account Number _____ Checking Savings
 Credit Card Type _____ Credit Card # _____ Exp Date _____ 3 Dig # _____
 Your First Draft will Be On: ____/____/____ Initial 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. Credit cards may be used with a \$1.00 convenience fee per transaction. 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. **NO PHONE or EMAIL CANCELLATIONS.**

Cancellation will not be accepted until past dues are paid.

Signature: _____ Date: _____

Reoccurring payments will be charged via bank draft/credit card within the first 5 business days of each month. Membership holds will not be authorized unless medically necessary with official documentation from the Doctor and approval from the Membership Director. Two consecutive insufficient fund transactions will result in termination of membership. A **\$30.00** service fee for each insufficient fund transaction. All past dues will be charged when the membership is reactivated. Refunds from **ANNUAL Memberships** will not be given unless due to medical reasons. Member is held accountable for membership type changes.

Signature: _____ Date: _____



TERMS AND CONDITIONS

The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access. I agree to abide by the rules and regulations of the YMCA, which are designed for the enjoyment of all its members. The protection of members and guest who are utilizing the YMCA is of paramount concern to the YMCA. We reserve the right to deny access of membership to any person whose behavior is determined to be in conflict with the welfare and safety of other members and/or staff. This includes a person is a registered sexual offender; has plead guilty to or been convicted of any crime involving sexual abuse; or a crime against persons such as a child, spousal or parental abuse. It will also include any offense related to the sale or transportation of illegal, habit forming or dangerous drugs; is presently clearly under the influence of intoxicating beverages or behavior modifying drugs. This code of conduct does not permit language or any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct. This includes inappropriate attire, angry or vulgar language, physical contact with another person in angry or threatening way, any demonstration of sexual contact or activity, harassment or intimidation by words, gestures, body language or any other menacing behavior, theft or behavior resulting in destruction of property. Parents are held responsible for the behavior of their children.

INFORMED CONSENT/LIABILITY WAIVER AGREEMENT

I/We, the undersigned, realized that there may be medical risks associated with physical exercise, the use of this facility, or use of equipment within the facility. I/We also recognize that the YMCA cannot evaluate my/our physical abilities and medical limitations as they pertain to participation in programs, to use the facility, or use of equipment within the facility. I/WE THEREFORE ASSUME ALL RESPONSIBILITY FOR HAVING A THROUGH MEDICAL EXAMINATION PERFORMED, BY A MEDICAL PRACTITIONER OR MY/OUR CHOICE, BEFORE PARTICIPATING IN ANY PROGRAMS AND PRIOR TO USING THE FACILITIES OR EQUIPMENT WITHIN YMCA FACILITIES.

Furthermore, in consideration of my/our participation in the activities of the YMCA and its respective officers, employees and members, including but not limited to its or their own negligence, and do hereby for myself/ourselves. Heirs, executors and administrators, waive, release and forever discharge any and all rights and claims for damages which I/We may have or which may hereafter accrue to me arising out of or connected with my participation in any of the activities of the YMCA, use of its facilities, or use of the equipment within its facilities.

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of YMCAs of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability of other claims, including loss of property, to the fullest extent of the law. The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

YMCA Photo/Audio Visual/Narrative Release

Consent & License. For my participation in activities to be conducted by the National Council of Young Men's Christian Associations of the United States of America ("YMCA of the USA") or any of its chartered member associations in the United States (collectively "the Y"), and collaborating third parties, I consent, now and for all time, to the making, reproduction, editing, broadcasting or rebroadcasting of:

- video film or footage of me,
- sound track recordings of me
- photo reproductions of me
- any narrative account of my experience

My consent includes a perpetual license to the Y and collaborating third-parties for the use of the above materials for publication, display, sale or exhibition in promotions, advertising, education and commercial uses. Use includes reproductions in any form and media currently existing or later conceived, adaptations and/or revisions, throughout the world in perpetuity.

I understand and agree there may be no additional compensation for this license, and I will not make any claim for payment of any kind from the Y or collaborating third-parties. I may, or may not be, identified in such licensed uses; however, my name will not be used to endorse any particular products or services.

Ownership, Confidentiality, and Shared Use. With respect to any of the above uses, I further agree:

- All works shall belong to YMCA of the USA;
- The Y has no duty of confidentiality regarding any licensed uses;
- YMCA of the USA shall exclusively own all known or later existing rights to the uses throughout the world;
- The Y and collaborating third-parties may use any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account for any purpose without additional compensation to me.

Release from Liability. I agree that my consent is irrevocable. I hereby release and discharge The Y and collaborating third-parties, from any and all claims, actions, lawsuits or demands of any kind arising out of my consent, license grants, uses, or the shared uses of any works or materials referenced herein.

I, undersigned, have read, understand and agree to the above.

Signature of Applicant

Date
