



FOR OFFICE USE ONLY

Membership Identification Number

Join Date

Grid for Membership Identification Number

Grid for Join Date

YMCA OF AVERY COUNTY
Membership Application

PRIMARY MEMBER INFORMATION:

Form for primary member information including title, name, address, phone, and birth date.

PARTICIPATING MEMBERS:

Table for participating members with columns for name, birthdate, and gender.

AREAS OF INTEREST:

Form for areas of interest and how the applicant heard about the YMCA.

Please continue to next page...

Office Use Only

Form for office use only including membership code, payment options, and fees.



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Williams YMCA of Avery County
Membership Agreement & Release/Liability Waiver

MEMBERSHIP AGREEMENT

Table with 2 columns: Agreement terms and Please initial: field.

RELEASE / LIABILITY WAIVER

In consideration for being permitted to utilize the facilities, services, and programs of the YMCA for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliates with the YMCA, without respect to location, the undersigned, for himself or herself 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.

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, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.
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 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 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.
4. THE UNDERSIGNED HEREBY UNDERSTANDS THAT THE YMCA RECOMMENDS ALL MEMBERS CHECK WITH THEIR HEALTHCARE PROVIDER before participating in any physical activities.
5. THE UNDERSIGNED HEREBY UNDERSTANDS THAT THE YMCA RECOMMENDS ALL MEMBERS ATTEND EQUIPMENT ORIENTATION before using any equipment or beginning any exercise.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of North Carolina 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, & further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

Member Signature: _____ Date: _____
(parent or legal guardian if under 18 years old)

Spouse Signature: _____ Date: _____



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MEMBERSHIP TYPE AGREEMENT

Please Select One

- Annual Drafted Membership: To be automatically drafted annually until that time I wish to terminate my membership by filling out a Membership Change Form at the front desk. I understand that once I have paid my annual membership dues, I cannot put my membership "On Hold," and I am ineligible for a refund of any amount. Furthermore, I acknowledge that it is my responsibility to let the Williams YMCA staff know in writing of any changes to my payment type, and that I will be responsible for a \$30 NSF fee in addition to the cost of my membership dues should my payment be returned.
Monthly Drafted Membership: To be automatically drafted monthly until that time I wish to terminate or place my membership on hold by filling out a Membership Change Form at the front desk. I understand that once I have paid my monthly membership dues, I am not eligible for a refund of any amount. Furthermore, I acknowledge that it is my responsibility to let the Williams YMCA staff know in writing of any changes to my payment type, and that I will be responsible for a \$30 NSF fee in addition to the cost of my membership dues should my payment be returned.
Annual Invoiced Membership: To be invoiced annually by mail until that time I wish to terminate my membership by filling out a Membership Change Form at the front desk. I understand that once my invoice has been issued, I am responsible for the total amount due; and that once I have paid my annual membership dues, I cannot put my membership "On Hold," and I am ineligible for a refund of any amount. Furthermore, I acknowledge that it is my responsibility to let the Williams YMCA staff know in writing of any changes to my payment type, and that I will be responsible for a \$30 NSF fee in addition to the cost of my membership dues should my payment be returned.
Monthly Invoiced Membership: To be invoiced monthly until that time I wish to terminate or place my membership on hold by filling out a Membership Change Form at the front desk. I understand that once my invoice has been issued, I am responsible for the total amount due; and that once I have paid my monthly membership dues, I am not eligible for a refund of any amount. Furthermore, I acknowledge that it is my responsibility to let the Williams YMCA staff know in writing of any changes to my payment type, and that I will be responsible for a \$30 NSF fee in addition to the cost of my membership dues should my payment be returned.

I understand and agree with the above process for membership type payments:

Member Signature _____ Date _____

If under 18, must be signed by parent or guardian

Staff Signature _____ Date _____



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Williams YMCA of Avery County
AUTOMATIC PAYMENT PLAN & CODE OF CONDUCT

PAYMENT PROCEDURES

PAYMENT OPTIONS:

- 1. Full Year - Yearly payment by Cash, Check, or Credit Card. Full amount for 12 months plus the joining fee is due at time of membership sign up. An invoice will be mailed to renew membership one month prior to expiration date.
2. Bank Draft - Monthly draft from a Checking or Savings Account in the amount of monthly membership dues. Payment for the first month plus the joining fee is due at time of sign up. The draft will be on the 1st of every month.
3. Credit or Debit Card Draft - Monthly draft from a Credit/Debit Card for the amount of monthly membership dues. Payment for the first month plus the joining fee is due at time of membership sign up. The draft will begin the following month on the 1st.

NAME ON ACCOUNT

CREDIT CARD #

EXPIRATION DATE

BANK NAME

ACCOUNT #

ROUTING #

YOU MUST CHOOSE A METHOD OF PAYMENT LISTED ABOVE TO SUBMIT AN ONLINE APPLICATION AND HAVE IT PROCESSED

Draft Agreement:

I hereby authorize the YMCA to initiate debits to the BANK or CREDIT CARD indicated on the attached check or credit card number for the amount of monthly membership dues. The authority is to remain in effect until the YMCA has received thirty (30) days written notification from me of the termination of this agreement, or until the YMCA or BANK has given me thirty (30) days written notice of the YMCA's or BANK's termination of the agreement. The YMCA will mail a thirty (30) day written notification of any change in the amount to be drafted. Should my BANK or CREDIT CARD, for any reason not honor my draft, I realize that I am still responsible for that payment and a \$30 YMCA service charge. Payment must be made to the YMCA in the form of cash or a money order payable to the YMCA prior to my next draft. This is in addition to any service fee my BANK OR CC COMPANY levies against my account.

Bank Draft: You may scan and attach a voided check for the account to be drafted.

ACCOUNT AUTHORIZATION SIGNATURE: _____ Date: _____

CODE OF CONDUCT

The YMCA is committed to providing a safe and welcoming environment for all members and guests. To promote safety and comfort for all, all individuals are asked to act appropriately at all times when in our facility or participating in our programs.

We expect persons using the YMCA to act maturely, to behave responsibly, and to respect the rights and dignity of others. Our Member's Code of Conduct outlines prohibited action, but the actions listed below are not an all-inclusive list of behaviors considered inappropriate in our facilities or programs.

- Using or possessing alcohol or illegal chemicals on YMCA property, in YMCA vehicles, or at YMCA-sponsored programs
Smoking on YMCA property - the YMCA and its property is a smoke-free environment
Carrying or concealing a weapon or any device or object that may be used as a weapon
Harassment or intimidation by words, gestures, body language, or any type of menacing behavior
Physical contact with another person in an angry, aggressive, or threatening way
Verbally abusive behavior, including angry or vulgar language, swearing, name-calling, or shouting
Sexually explicit conversation or behavior; and sexual contact with another person
Inappropriate, immodest, or sexually revealing attire
Theft or behavior that results in the destruction or loss of property
Loitering within or on the grounds of the YMCA

In addition, the YMCA reserves the right to deny access or membership to any person who has been accused or convicted of any crime involving sexual abuse, is or has been a registered sex offender, has ever been convicted of any offense relating to the use, sale, possession, or transportation of narcotics or habit forming and/or dangerous drugs, or is presently or habitually under the influence of dangerous drugs or chemicals, narcotics, or intoxicating beverages.

Members and guests are encouraged to take responsibility for their personal comfort and safety by asking any person whose behavior threatens their comfort to refrain from such behavior. Anyone who feels uncomfortable in confronting a person directly should report the behavior to a staff person on duty.

Member Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

(The above signees accept responsibility for all dependents and guests.)

Mouse over the Submit button to send form for processing