



Wood River Community YMCA MEMBERSHIP APPLICATION

For YMCA Use Only

- Date Received: _____
- By Employee: _____
- FA App. Request: _____
- Signature Verification _____
- Autopay information complete _____

Type of Membership*

(3 month Minimum)

- __ Youth (0-18).....\$23
- __ Young Adult (19-34).....\$39
- __ Adult (35+).....\$59
- __ Family.....\$85

__ Family Package)..... \$99
(includes Child Watch for all children)

* Prices do not include state and local sales tax.
* Prices are per month and subject to change.

Add On's:

(per month)

- __ Add On Child Watch\$15 first child
- __ Add On Child Watch.....\$5 each additional child
(For young adult and adult memberships only)
- __ Richard Odom Yoga.....\$25 for 1 person
- __ Richard Odom Yoga.....\$50 for 2 people

__ I would like to contribute \$_____ to support program and membership scholarship programs.

__ Please check here if you would like to apply for needs-based financial assistance (separate application required)

Primary Adult

First Name	Middle Name	Last Name	Date of Birth	Gender
Mailing Address		City	State	Zip
Home Phone	Cell Phone	E-mail Address		
Primary language	Race	Marital status		
Employer	Business Phone			

Secondary Adult

First Name	Middle Name	Last Name	Date of Birth	Gender
Mailing Address		City	State	Zip
Home Phone	Cell Phone	E-mail Address		
Primary language	Race	Marital status		
Employer	Business Phone			

Additional Family Members

Name (First, Middle, Last)	Date of Birth	Gender	Relationship to Primary Adult
Name (First, Middle, Last)	Date of Birth	Gender	Relationship to Primary Adult
Name (First, Middle, Last)	Date of Birth	Gender	Relationship to Primary Adult
Name (First, Middle, Last)	Date of Birth	Gender	Relationship to Primary Adult
Name (First, Middle, Last)	Date of Birth	Gender	Relationship to Primary Adult

Emergency Contact

Name	Phone	Relationship to Primary Adult
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Payment Method

- Authorized monthly draft from a checking or savings account
 Authorized monthly draft from a credit/debit card (Visa, MasterCard, or American Express)
 Six-month or twelve-month pay in full (cash, check, or credit/debit card)

Bank Draft Payment Please attach a voided check. <input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account Routing number: _____ Account number: _____ Name as it appears on account: _____ Financial Institution: _____	Credit/Debit Card Payment Charge my: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express Card number: _____ Expiration Date: _____ Name as it appears on credit card: _____ Financial Institution: _____
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Payment Authorization

I authorize my financial institution to honor drafts drawn by the Wood River Community YMCA on my account. Drafts from my account will be taken out on the 1st of each month. The amount drafted will be the current balance due on my account for membership dues. It is understood that my bank draft will be continuous until 14 days after written notification has been received by the YMCA. I further authorized this account to be used for any program registrations to be paid at the time of registration. Should any draft not be honored by my financial institution, I understand that it is still my responsibility to make payments for all fees due, including any fees not covered by the bank. The YMCA has the right to redraft any account that had non-sufficient funds. For drafting from a checking account, a voided check must be attached to this form. If at any time there is to be a deletion or cancellation of my membership, it is to be submitted in writing to the YMCA where my membership was purchased 15 days prior to the day the draft is to be charged to my account. Failure to do so will make the subsequent draft non-refundable. Changes or cancellations cannot be made by telephone or online. The YMCA will notify me, in advance, of any increase in my monthly membership draft amount.

Account Holder Signature _____

Date _____

How did you hear about the YMCA? (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Banner | <input type="checkbox"/> Phone book |
| <input type="checkbox"/> Direct mail | <input type="checkbox"/> Place of employment |
| <input type="checkbox"/> Drive by | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Employer | <input type="checkbox"/> School |
| <input type="checkbox"/> Internet/website | <input type="checkbox"/> Television |
| <input type="checkbox"/> Medical referral | <input type="checkbox"/> Y member |
| <input type="checkbox"/> Newspaper | |

I would like to help the YMCA better its mission by:

Volunteering at the YMCA

Donating to the YMCA

A staff member from the YMCA will contact you.

_____ (please let us thank them!)

What are your areas of interest?

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> 92Y LIVE | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Racquetball | <input type="checkbox"/> Studio Cycling |
| <input type="checkbox"/> After-school Programs | <input type="checkbox"/> Hiking | <input type="checkbox"/> Rafting | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Hockey | <input type="checkbox"/> Reading | <input type="checkbox"/> Swimming (Lap) |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Horseback Riding | <input type="checkbox"/> Recording Studio | <input type="checkbox"/> Swimming (Lessons) |
| <input type="checkbox"/> Biking | <input type="checkbox"/> Ice Skating | <input type="checkbox"/> Rock Climbing | <input type="checkbox"/> Teen Programs |
| <input type="checkbox"/> Child Watch | <input type="checkbox"/> Kayaking | <input type="checkbox"/> Rowing | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> CPR/1st Aid | <input type="checkbox"/> Kickboxing | <input type="checkbox"/> Running | <input type="checkbox"/> Triathlon |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Scuba Diving | <input type="checkbox"/> Video Studio |
| <input type="checkbox"/> Day Camp | <input type="checkbox"/> Lifeguarding | <input type="checkbox"/> Senior Programs | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Family Nights | <input type="checkbox"/> Martial Arts | <input type="checkbox"/> Skiing – Alpine | <input type="checkbox"/> Volunteering |
| <input type="checkbox"/> Fitness Assessment | <input type="checkbox"/> Middle School Programs | <input type="checkbox"/> Skiing – Nordic | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Football | <input type="checkbox"/> Nutrition. | <input type="checkbox"/> Snowboarding | <input type="checkbox"/> Water Aerobics |
| <input type="checkbox"/> Gardening | <input type="checkbox"/> Parent's Night Out | <input type="checkbox"/> Soccer | <input type="checkbox"/> Weight Management |
| <input type="checkbox"/> Golf | <input type="checkbox"/> Personal Training | <input type="checkbox"/> Softball | <input type="checkbox"/> Yoga |
| <input type="checkbox"/> Group Exercise | <input type="checkbox"/> Physical Therapy | <input type="checkbox"/> Strength Training | |



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Mandatory Risk Waiver and Membership Understanding

The Wood River Community YMCA provides many recreational and other activities to the public. YMCA participants understand that these activities do involve inherent risks which are beyond the control of the Wood River Community YMCA and their staff, volunteers and members. We, the undersigned, do understand that upon using the facility and/or services that we hereby assume all risks for the behavior, actions, and safety of myself, my minor child or children while involved in the activities. Therefore, I assume full responsibility for personal injury to myself and/or to members of my family, or for loss or damage to my personal property and expenses thereof as a result of my negligence or the negligence of my family participating in said activities. I have read and understand this agreement and release of liability, and do voluntarily agree to sign. I also understand that I can be denied access to the YMCA if my account is not current. I understand that to enter the YMCA on each visit, I will need to provide the proper identification. I also give the YMCA permission to utilize pictures of me and/or my family in YMCA marketing, promotions, and print media.

Code of Conduct

Using the mission and principles of character development as a guide, the following Code of Conduct is to ensure that all who enter our facility enjoy a safe, welcoming and comfortable environment. Individuals are expected to act in a manner that upholds these principles at all times when in our facility or participating in YMCA programs. We expect those using the YMCA to behave in a way that shows respect and caring for others of all ages, including YMCA employees, which includes not using any language or engaging in any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct. Specifically, when at the YMCA or participating in a YMCA program, action that does not show respect for others and is not permitted includes:

- Wearing inappropriate attire. Attire must be appropriate, including swimsuits only in the pool area and shoes, shorts and shirt or leotard in other areas of the facility. Clothing with vulgar or profane writing or pictures is not allowed.
- Using angry or vulgar language (includes swearing, name calling or shouting).
- Making physical contact with another person in any angry or threatening manner.
- Engaging in inappropriate behavior, sexual or otherwise.
- Harassing or intimidating by words, gestures, body language or any other menacing behavior.
- Stealing or other behavior that results in the destruction or loss of property.
- Carrying or concealing any weapons, devices or objects that may be used as weapons.
- Using or possessing illegal drugs or alcohol on YMCA property, in YMCA vehicles or a YMCA sponsored programs.
- Loitering.
- Any other conduct of an inappropriate, threatening or offensive nature.

Members and guests are encouraged to be responsible for their personal comfort and safety and ask any person whose behavior threatened their comfort to refrain from doing so. If a member or guest feels uncomfortable confronting the person directly, they should report the behavior to staff when asked. Management staff will investigate all reported incidents. Suspension or termination of YMCA membership privileges may result from a determination by the YMCA that a violation of the Code of Conduct has occurred. The YMCA reserves the right to refuse service to anyone who does not adhere to the values and mission of the YMCA.

I have read and agree to the “Mandatory Risk Waiver and Member Understanding” and the “Code of Conduct”. I further agree to abide by the Membership Policy Handbook available for download at www.woodriverymca.org

Signature _____ Print Primary Adult Name _____ Date _____

Signature _____ Print Secondary Adult Name _____ Date _____

Names of minor children I am responsible for:
