 2021 DVAC Membership Application

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**Membership Category: Please Initial! SPONSOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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|  | **Full Club** | **Swim Fitness** |  |  | **Full Club** | **Swim Fitness** |
| **Family Memberships** |  |  |  | **Individual Memberships** |  |  |
| ***Year-Round (12+ months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |  | ***Year-Round (12+ months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |
| ***Seasonal (6 months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |  | ***Seasonal (6 months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |
| ***Out of Area (12 + months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |  | ***Out of Area (12+ months)*** | \_\_\_\_\_\_ | \_\_\_\_\_\_ |
|  |  |  |  |  |  |  |
| ***Student Membership*** | \_\_\_\_\_\_ |  |  | ***Destination***  ***Family Individual*** |  |  |

**Applicant Information:**

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| **Primary Applicant’s Name:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_ | | | | | | |
| **Significant Other’s Name:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_ | | | | | | |
| **Mailing Address:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **City:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  | **State:** | \_\_\_\_\_\_\_\_ |  | **Zip:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Contact Phone:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Email:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **Significant Other’s Phone:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **Email:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

**Anyone on membership MUST live in the household**

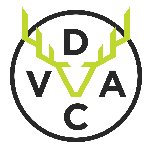
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| --- | --- | --- | --- | --- |
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|  | **Dependents Name** | **Age** | **DOB** | **Relation** |
| **1.** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **2.** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **3.** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **4.** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **5.** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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I submit this information as an application for membership to Deer Valley Athletic Club. I agree and understand that I am ultimately responsible for the behavior and conduct of all members listed under my membership and any guests of those persons listed under my membership. I further agree to abide by the rules and regulations of the club as disclosed to me by the club through the disclosures included with this application and/or provided to me by the club through other accepted means. I understand that resignation from my membership before the agreed contract is up will result in appropriate cancellation fee.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Applicant Signature Date*

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| --- | --- |
| Membership Start Date:  Initiation Fee Paid:  How Paid: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  $\_\_\_\_\_\_\_\_\_\_  \_\_\_ck \_\_\_CCard \_\_\_Cash |
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Membership Disclosures/Waivers

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**Roster Authorization:** I agree to have my information designated below disclosed in the Deer Valley Membership

Roster that can be accessed by any and all members of the club. No information is given to any entity or person who is not a staff member or club member of Deer Valley.

Email address: \_\_\_Yes \_\_\_No

Contact Phone: \_\_\_Yes \_\_\_No

Address: \_\_\_Yes \_\_\_No

**Membership Disclosures:**

\_\_\_\_\_ I agree to pay for all charges on our account for dues, guest fees, pro shop purchases, food purchases, social events and

all other charges.

\_\_\_\_\_ I have read and understand the rules and regulations of Deer Valley and agree to abide by all rules set forth by the club

and agree that anyone using the facilities under my membership must abide by all rules and regulations.

**Liability Waiver:**

I understand that Deer Valley is an athletic club that provides opportunities for sports and activities. I realize that participation in such activities involves risks and the possibility of injury or accidents. I hereby release Deer Valley Athletic Club, its owners, staff members and other parties from any and all responsibility for any losses or injuries incurred by myself through membership in the club or participation in any and all activities at the club or provided by the club.

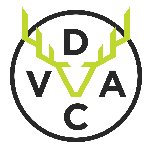
I further understand that the club will make every effort to contact the significant other, parent (in the case of a child) or this emergency contact (Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) in case of an accident or medical emergency involving a member, but the staff will immediately contact emergency authorities prior to doing so. I also understand that I must disclose to Deer Valley and its staff any and all medical issues related to anyone listed on my membership application that could be necessary information in a medical emergency.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Applicant Signature Date*

**Please select the following activities you would be interested in learning more about:**

* **Tennis**
* **Adult Clinics**
* **Junior Clinics**
* **USTA Leagues**
* **Indoor Pool**
* **Outdoor Pool**
* **Swim Lessons**
* **Social Events**
* **Gymnastics and Cheer**
* **Group Fitness**
* **Personal Training**
* **Kids’ Programs**
* **Basketball**
* **Racquetball**



Credit Card Authorization Form

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**Credit Card Information:**

Type of Card: \_\_\_\_ Visa \_\_\_\_ Mastercard \_\_\_\_American Express

Name on Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exp Date: \_\_\_\_\_/\_\_\_\_\_\_\_ CCV: \_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ I understand that upon joining Deer Valley I must present a credit card to be kept electronically in the encrypted

computer system of DVAC.

\_\_\_\_\_ I understand that I will receive a monthly statement via email from the club on the second day of each month. I further

understand that Deer Valley will charge my credit card on the first of the month for the charges listed on the monthly statement. I understand that if I have an issue with a charge on my account, I should contact the club on the first of the month.

\_\_\_\_\_ I understand that if any information related to my credit card on file changes, I will notify Deer Valley of the changes

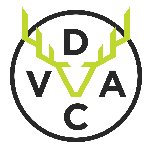
immediately and that Deer Valley may charge me a late fee of $10. I further understand that Deer Valley will waive the first time my credit card is declined for any reason, but the club may charge me a $25 NSF for each time my credit card is declined thereafter.

\_\_\_\_\_ I understand that I will be responsible for any and all costs incurred by Deer Valley in pursuing payment for my use of

the club in the event I do not pay my bill in a timely manner. I further understand that Deer Valley will pursue payment for such services through any and all available methods including the hiring of an attorney and utilizing the court system and that I will be responsible for all charges.

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*Applicant Signature Date*



2021 Club Fees

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**Monthly Payment Late Fee** Any payments for statement balances received after the 15th of the month for the

previous month will be subjected to a $25 late fee. Any payments returned by the

member’s financial institution will be subject to a $25 NSF fee. The first time this happens, the $25 NSF Fee will be waived.

**Towel Fee** Individuals: $15 per year, Family Memberships: $25 per year (Billed June 1st)

**Locker Fee** Annual Fee (Calendar Year – Jan 1 to Dec 31) $100 per year

Monthly Fee (1st of the Month) $15 per month

Key Deposit $50

**Membership Hold Fee** If you wish to place your membership on hold, there is a $100 hold fee. If hold status is

longer than one year, full initiation fee is due at the time of return. DV members may

place membership in inactive status **one** time in 5 years.

**Guest Fees** These fees are for guests of current DVAC Members for no more than 6 times per year.

Tennis: $10 per day, $50 per week

Pool/Fitness: $5 per day, $25 per week

Tennis Clinic/Lesson: $5 per clinic/lesson

**Tennis Indoor Court Fees** A la carte: $24 per hour

DVAC Discounted Court Card (20 hours) $350

No Show Fee for court reservations $50 per occurrence

**Ball Machine Club** A la carte: $25 per hour

Individual Ball Machine Club Membership $200 per year

Family Ball Machine Club Membership $250 per year

**Fitness Group Classes** Free for all appropriate DVAC Members, Non- Members $10 per class

**Childcare Services** Free for all appropriate DVAC Members, Non- Members $10 per child

**Facility Rental Fees** Contact the staff for more information