



TYPE OF MEMBERSHIP <i>(mark an "X" in both category and options):</i>		YTHRIVE APPOINTMENT BOOKED?				
Individual	<input type="checkbox"/>	Essentials	<input type="checkbox"/>	COACH:	DATE:	TIME:
Senior	<input type="checkbox"/>	Enhanced	<input type="checkbox"/>			
Household	<input type="checkbox"/>	Everything	<input type="checkbox"/>			
Youth	<input type="checkbox"/>	Financially Assisted				
Child	<input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

**MAIN CONTACT:**

LAST NAME:		FIRST NAME:		
ADDRESS:		CITY:		POSTAL CODE:
MAIN PHONE:		SECONDARY PHONE:		BIRTHDATE (DAY/MTH/YR):
EMAIL:				MEDICAL CONCERNS/ALLERGIES:
EMERGENCY CONTACT:		EMERGENCY PHONE:		EMERGENCY RELATIONSHIP:

CONFIRMATION OF IDENTITY: \_\_\_\_ PHOTO ID (EX. Driver's license, student card, passport, etc.)

**HOUSEHOLD MEMBER(S) ON MEMBERSHIP:**

FIRST NAME:	LAST NAME:	BIRTHDATE (DAY/MTH/YR):

**YMCA COMMUNITY STARTS HERE**

As a Charity the YMCA ensures everyone can take part in our programs and services even if they are unable to afford the full cost. Our YMCA Community Starts Here Campaign helps to raise funds to help ensure this.

By adding **\$3.00-\$6.00** to your biweekly membership payments (\$78.00 - \$156/year) you can help provide much needed respite for an isolated senior, teach a child to swim or provide a week at day camp for one a youth in need. Every gift stays in **your** community.

I would like to help my community by adding \$\_\_\_\_\_ to **each** membership payment to go towards the YMCA Community Starts Here campaign.

**Or**

I would like to help my community by adding \$\_\_\_\_\_ as a **onetime** gift to my membership to go towards the YMCA Community Starts Here campaign.

## CONDITIONS & AGREEMENTS

**ACCURATE ACCOUNT & ADDRESS INFORMATION:** The YMCA must receive written notice of any changes to an account or address information a minimum of 10 days prior to the next scheduled payment date. The YMCA is not responsible for any errors, miscommunications or service charges that may result from failure to inform the YMCA of any account or address information changes in a timely manner.

**RENEWALS:** All YMCA Memberships, except those paid in full, are continuous and renew automatically every 2 weeks. The YMCA will provide a minimum 30 days' notice that outlines any fee or policy changes.

**CANCELLATIONS:** May be requested any time but must be at least 7 days prior to a payment. Notice of cancellation can be made in person, through email or by phone. Cancellations on Annual Memberships will not receive a refund or credit on their account. A 'stop' payment through your financial institution does not constitute a cancellation. Cancellations will not be processed retroactively. Exceptions supported by documentation from a medical physician or other extenuating factors may be considered. Donations can be stopped at any time by speaking to a YMCA Membership Services Representative at your branch.

**NSF POLICY:** Should a payment be declined for any reason; payments will be subject to a \$30 Service Charge. YMCA Memberships and access to facilities and programming may be suspended until the account is returned to good standing. Outstanding payment(s) must be paid before the next installment, or cancellation of membership will take place. Outstanding fees must be paid in full to rejoin the YMCA or register in any YMCA programs.

**YOUR RIGHTS UNDER THE CONSUMER PROTECTION ACT:** You may cancel this agreement and receive a full refund at any time during the period that ends 10 days after the later of the day you receive a written copy of the agreement and the day all the services are available. You do not need to give the supplier any reason for cancelling during this 10 day period. In addition, there are grounds that allow you to cancel later. You may also have other rights, duties and remedies at law. To cancel this agreement, you must give notice of cancellation to the supplier, at the address set out in the agreement, by any means that allows you to prove the date on which you gave notice. If you cancel this agreement, the supplier has 15 days to refund any payment you have made which applies to services beyond 30 days of the notice to cancel.

**YMCA COMMITMENT TO PRIVACY:** The YMCA is committed to protecting personal information by following responsible handling practices. We collect and use personal data in order to better meet your service needs, to ensure a safe environment while using our centre, for statistical purposes, to complete payment transactions and to satisfy regulatory obligations.

I understand that any information on this form may be used for YMCA promotions, mailings and newsletters

**I DO NOT WISH TO BE INCLUDED IN THESE MAILINGS**

I have read, understand and freely accept the terms and conditions stated above

MEMBER NAME:	MEMBER SIGNATURE:	DATE:
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### OFFICE USE ONLY:

ORDER #:	TODAYS PAYMENT: \$ Payment Method: Void Cheque/ Direct Deposit Credit Card Debit Card	COMMUNITY STARTS HERE DONATION: \$ MEMBERSHIP ADD ON ONE TIME DONATION
NEXT PAYMENT DATE:	PAYMENT AMOUNT: \$	
STAFF NAME:	STAFF SIGNATURE:	DATE:

**DO NOT ATTACH ANY PAYMENT DETAILS TO THIS FORM. ALL PAYMENT DETAILS ARE TO BE DIRECTLY ENTERED INTO AVOCADO.**

Honesty Caring Respect Responsibility Inclusiveness