



Boys & Girls Club of St. Marys Gym Membership

Date: _____

Payment Received: _____

Cash Card Chk#: _____

Staff Initials: _____

Date	Gym Type	Membership Type	Duration
	<input type="checkbox"/> Fitness Center <input type="checkbox"/> Pickleball	<input type="checkbox"/> Individual <input type="checkbox"/> Family	<input type="checkbox"/> Monthly <input type="checkbox"/> Yearly

Personal Information

Full Name		Gender	
Address			
Phone	Email	DoB	Age
			Referred by:
Emergency Contact	Name	Relationship	Phone Number(s)

Additional Members for Family Membership

Full Name		Gender	
Address			
Phone	Email	DoB	Age
			Referred by:
Emergency Contact	Name	Relationship	Phone Number(s)

Full Name		Gender	
Address			
Phone	Email	DoB	Age
			Referred by:
Emergency Contact	Name	Relationship	Phone Number(s)

Full Name		Gender	
Address			
Phone	Email	DoB	Age
			Referred by:
Emergency Contact	Name	Relationship	Phone Number(s)

Is there any medical information or history that you feel you should disclose to the Boys & Girls Club of St. Marys? If so, it's your responsibility to discuss how to safely exercise with your physician:

DISCLAIMER

It is your responsibility to obtain a physical examination and consult your doctor before exercising.

WAIVER OF LIABILITY

I HAVE READ AND UNDERSTAND:

- The fitness center **WILL NOT** be supervised.
- Weight training is inherently dangerous, and there is a risk of injury.
- The use and selection of exercise programs is my own responsibly.
- All exercises, including the use of free weights and exercise machines, are at my own risk.
- I will not hold the Boys & Girls Club of St. Marys liable for any injuries from the use of equipment or exercise.
- The Boys & Girls Club of St. Marys staff, directors, board members, and Holding Corporation are not responsible for personal injury or personal property.
- My picture, moving pictures, or any other graphic depiction or likeness, can be used by the Boys & Girls Club and its activities.
- I will be responsible for any and all costs of medical attention and treatment required due to an accident or injury that may occur at the Boys & Girls Club of St. Marys.

CARD HOLDER AGREEMENT

- I am responsible for anyone who enters the facility when entering and exiting the facility.
- I will not hold the door, under any circumstance, for anyone, regardless if they are a current member or not.
- If I bring an individual who is not a member into the facility, my member will be terminated immediately with absolutely no refund.
- I understand that I am responsible for my Club key card, and that there is a \$5 security deposit to obtain a key card. I also understand that key cards must be turned in by their expiration of my membership (stated by the Club) or I will forfeit the return of the \$5 deposit.

I have read the completed application and understand the rules of the Boys & Girls Club of St. Marys, Inc.

I hereby release, waive, acquit and forever discharge the Boys & Girls Club of St. Marys, and Boys & Girls Clubs of America, the Holding Company, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as board members, staff directors or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participate in activities of said organizations either at or away from the club.

I HAVE READ AND AGREE TO ALL TERMS THAT THE BOYS & GIRLS CLUB OF ST. MARYS HAS PRESENTED TO ME. I CERTIFY THAT THE APPLICATION INFORMATION PROVIDED BY ME IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

DATE

