For Internal Use Only Tour Y60 Orientation Coach Approach

APPLICATION FOR MEMBERSHIP

HAMILTON AREA YMCA

PRIMARY MEMBER INFORMATION						
First Name	MI	Last Name				
Gender Male Female						
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Mailing Address			1			
City						
Home Phone						
E-mail Address(es)						
Employer						
EMERGENCY CONTACT INFORMATION Emergency Contact						
Emergency Contact Phone						
FAMILY INFORMATION Please list all those y						
Name (First & Last)	Gender	Relation to Primary Member	Date of Birth			
Name (First & Last)	delidei	Relation to Primary Member	Date of Birth			
observation or use of facilities or equipment, or participation in any and any personal representatives, heirs, and next of kin, hereby ackr and carefully consider such premises and facilities or the affiliated p ment or participation in such affiliated program constitutes an acknown inspected and carefully considered and that the undersigned finds are by the undersigned and such children. IN FURTHER CONSIDERATION TION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN 1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF branches thereof, its directors, officers, employees, and agents representatives, assigns, heirs, and next of kin for any loss or d of the undersigned or such children whether caused by the negli or any facilities or equipment therein or participating in any program affiliated with the YMCA whether c 3. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAV due to the presence of the undersigned or such children in, upor participating in any program affiliated with the YMCA whether c 3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY negligence of releasees or otherwise while in, about or upon the any program affiliated with the YMCA. 4. The Hamilton Area YMCA/Sawmill Branch reserves the right to deemed appropriate. All partners of the Hamilton Area YMCA/Sa advertising or promotion as deemed appropriate. 5. By signing this waiver, I, and the individuals listed on my mem so may result in revoked membership privileges at the Hamilton	owledges, agrees a rogram. It is furthe weldgment that su had accepts same as OF BEING PERMITT ANY OFF-SITE PRODUCT CONTROL OF SUCH CHILDREN, However, and any claused by the neglig FOR AND RISK OF premises of the YILD photograph or film wmill Branch reserves bership, agree to a surgest of the property of the property of the product of the property	and represents that he or she has, or immediately r warranted that such entry into the YMCA for ob ich premises and all facilities and equipment there being safe and reasonably suited for the purpose ED TO ENTER THE YMCA FOR ANY PURPOSE INCIGRAM AFFILIATED WITH THE YMCA, THE UNDERS IEREBY RELEASES, WAIVES, DISCHARGES AND COI d to as "releasees") from all liability to the undersim or demands therefor on account of injury to these or otherwise while the undersigned or such con the YMCA. ALESS the releasees and each of them from any, lower than the YMCA. A premises or in any way observing or using any spence of the releasees or otherwise. BODILY INJURY, DEATH OR PROPERTY DAMAGE to MCA and/or while using the premises or any facility and many member and use said pictures or film for any we the right to photograph or film any member and we the right to photograph or film any member and	upon entering or participating will, inspect servation or use of any facilities or equiption and such affiliated program have been e of such observation, use or participation LUDING, BUT NOT LIMITED TO OBSERVA-IGNED HEREBY AGREES TO THE FOLLOWING: NVENANTS NOT TO SUE the YMCA and all igned or such children and all his personal e person or property or resulting in death hildren is in, upon, or about the premises open is in, upon, or about the premises open, liability, damage or cost they may, incurfacilities or equipment of the YMCA or the undersigned or such children due to ties or equipment thereon or participating in y form of advertising or promotion as d use said pictures or film for any form of			
THE UNDERSIGNED further expressly agrees that the foregoing RELE of the State of New Jersey and that if any portion thereof is held inv						
THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEA: statements or inducement apart from the foregoing written agreeme		•	ther agrees that no oral representations,			
THE UNDERSIGNED understand the YMCA conducts regular sex offer to cancel membership and/or end program participation and remove		all members/participants/guests. If a sex offender	r match occurs, the YMCA reserves the right			
I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE						
Signature of Applicant/Parent			Date			
Signature of Other AdultName of Child in Program			<u> </u>			
Name of Child in Program						

AUTOMATIC BANK DRAFT AUTHORIZATION FORM

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Finance Use Only				
Member ID				
Member Code				
Monthly Membership Draft Amt				
Monthly Bank Draft Amt (12 mo)				
Monthly Contribution Draft Amt				
Total Monthly Amt				
Draft Start Date				
One Time Contribution Amt				

Signature Date	
TERMINATION POLICY FOR BANK DRAFT Memberships may only be terminated by completing a Termination Form and surrendering the current membership card (s) to the Customer Service Desk. This must be done 30 days prior to the 15th of the month which you ar requesting the draft to be stopped. It is the member's responsibility to confirm termination of draft fees from the bank account.	ieir
I would like to contribute an additional amount monthly to support my YMCA as it helps my community by providing financial assistance to those in need. <i>(Check box below for additional amount)</i> \$5.00 \$10.00 \$15.00 \$20.00 \$0 Other	
Bank Transit Routing No *voided check must be attached	
Account Number or debit card, please present your card at the Custome Service Desk.	≘r
Bank Name If you choose to draft your membership dues via credit	
Checking Account* Credit Card Debit Card	
Please choose one and complete the information:	
NOTE: It is the member's responsibility to notify the Hamilton Area YMCA of any change to the above information, including updating Credit Card expiration dates. There will be a service charge for any Bank Draft that is returned by the bank for insufficient funds.	
If funds are unvailable on the scheduled date for payment a \$25.00 service charge will be applied. Unavailability of funds includes insufficient funds, account closed, decline, exception, hold, etc. The Hamilton Area YMCA is not responsible for service fee.	
If opting to draft the Joiner Fee monthly, I understand that the Hamilton Area YMCA will cease this payment after 1 payments, while continuing the monthly membership draft.	2
I understand it is my responsibility to check my monthly bank statement and report any corrections or change to the below information immediately to the Hamilton Area YMCA.	e
This debit will commence on (date) and occur monthly on the fifteenth day of the month. Bank draft memberships are perpetual and will continue until the member requests termination. Authorization will remain effect until the Hamilton Area YMCA has received written notification 30 days prior to the 15th of the month.	
I, (name) authorize the Hamilton Area YMC to initiate debit entries, via Bank Draft, to my Bank Checking Account/Credit Card Account at the depository financial institution listed below and to debit the same such account. I acknowledge that the origination of the Bank Draft transaction to my account must comply with the provisions of U.S law.	