

## YMCA at Gothenburg Health Membership Application

\*A one-time \$40 Join Fee in addition to prorate membership amount is due at time of sign up

Please Check Box of Membership Type		Circle Rate Desired			
Membership Type (Financial Assistance for YMCA Membership is available for qualified applicants)	*Join Fee	YMCA Men			
		Monthly	Annual		
Family (2 adults in same household &					
legal dependents under age 24)	\$40	\$60	\$720		
<b>Adult</b> (age 19-64)	\$40	\$40	\$480		
Youth (age 5-18)	\$40	\$22	\$264		
<b>Adult 65+</b> (age 65+)	\$40	\$35	\$420		
<b>65+ Couple</b> (2 adults, one is age 65+)	\$40	\$51	\$612		
Golden (age 80+)	\$0	FREE	FREE		

f Corporate Account, Employer Name				_	
<b>Member Information</b> (Registered sex on the National Offender Database.)	ffenders are proh	ibited fro	om Y property; all mem	bers are scree	ened agains
Adult First Name	Last Name		Ethnicity		Male
Female Date of Birth/					. <del></del>
2 <sup>nd</sup> Adult First Name Last Name			Ethnicity		
Female Date of Birth//	Employer:				
Address:	City, St. Zip:				
Phone #:					
E-mail Address:					
Emergency Contact	Phone Number	r:			
Dependent Children's Name (Use	e Back if needed)	M/F	Date of Birth	Ethnicity	

YMCA at Gothenburg Health – 910 20<sup>th</sup> Street, Gothenburg NE 69138 308-537-4022 ymcaoftheprairie.org YMCA Mission: "To put Christian principles into practice through programs that help build a healthy spirit, mind, and body for all."

Would you like to donate to our Annual Support Campaign? \_\_\_\_\_yes \_\_\_\_\_no

0 0	One Time donation added to first month's membership draft: \$  Recurring monthly donation added to monthly membership draft: \$  I would like to be contacted during the annual campaign in November: yes / no								
	ayment information: Annual Membership1st of month draft15th of month draft								
Monthly Draft Information: Signing below authorizes a recurring draft from the account requested. A 30-day cancellation notice is required to stop the monthly draft and to cancel membership. If your account does not have sufficient funds available or is declined when the Y charge attempts to clear and is returned unpaid, an additional returned payment fee of \$30 will be charged.									
Are	eas of InterestAerobics-Group ExAquaticsChildcareFundraising								
	Family Programs Senior ProgramsSportsStrength Training								
	Summer CampYouth ActivitiesVolunteerism								
Rel o	and to use its facilities, equipment and machinery in addition to the payment of fee or charge, I do hereby waive, release, and forever discharge the YMCA, its staff, and representatives from any and all responsibilities or liability for injuries or damages resulting from my or my family's participation in any YMCA activities on and off the premises in any way out of or connected with my participation in any activities of the YMCA or the use of any equipment of the								
0	photographs including (but not by way of limitation) illustration, promotion and advertising and trade, television and multimedia and to use my name in conjunction therewith if the YMCA chooses of me participating in any and all YMCA activities and/or events for publicity and/or promotional purposes without obligation or liability to me.								
0	I declare, for any minor(s) and myself that I/we are physically able to participate in the activities of the YMCA OF TH PRAIRIE.	_							
0	information or employment that would affect my payment procedure.								
0	I understand that membership cards are nontransferable and that loaning this card may subject the owner to loss of privileges. The cost is \$5 for a replacement card.								
0	I understand that a membership category may change due to age or school enrollment status and that this change may affect the membership rate. YMCA Membership Rates may change with 30 day Notice.								
0	I understand that any person who supports the YMCA's purpose may become a member of this corporation, in accordance with such provisions as may be established by the Board of directors and shall so continue to be a member unless the Board or its authorized agent concludes in its sole discretion, that a member has failed to live up to the standards and commitments of being a member of this YMCA. The YMCA has the right to terminate my YMCA privileges. The YMCA has the right to terminate YMCA privileges anytime if: it appears that you are taking actions or doing things that are contrary to the YMCA's mission, or it appears that you are involved in criminal acts or you are acting in ways that disrupt the YMCA's operations.	\ T							
0	By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Mer Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law. By signing this I understand that I agree with the above terms.	1							
	Signature YMCA Staff initials								