

Lake County YMCA
Application for Membership



Member Info

<u>First Name</u>	<u>Middle Initial</u>	<u>Last Name</u>
<u>Gender:</u> Male___ Female___		
<u>Birth Date:</u>		
<u>Marital Status:</u> Single___ Married___ Divorced___ Separated___		
<u>Race:</u> Unspecified___ Alaskan Native___ African American/Black___ Asian/Pacific Islander___ Caucasian/White___ Hispanic___ Other___		

Contact

Marketing

Home Address Line 1	
Home Address Line 2	
City	
State/Zip	
Home Phone	()
Cell/Other Phone	()
E-mail	
Employer	
Employer Matches Gifts?	Yes/No
Business Address Line 1	
Business Address Line 2	
State/Zip	
Business Phone	() Ext:
Business Fax	()
Emergency Contact	First Name Last Name
Emergency Phone	
Relation to Primary? Self Spouse Son Daughter Parent Dependent Friend Other	

Household Income
<input type="checkbox"/> \$0-\$13,999
<input type="checkbox"/> \$14,000-\$24,999
<input type="checkbox"/> \$25,000-\$39,999
<input type="checkbox"/> \$40,000-\$54,999
<input type="checkbox"/> \$55-\$74,999
<input type="checkbox"/> \$75,000+

How did you hear about the YMCA?	Areas of Interest/ Volunteer Work?
<input type="checkbox"/> Radio <input type="checkbox"/> Television <input type="checkbox"/> Billboard <input type="checkbox"/> Driveby-live in area <input type="checkbox"/> YMCA <input type="checkbox"/> Direct mail <input type="checkbox"/> Email <input type="checkbox"/> Yellow Pages <input type="checkbox"/> Newspaper <input type="checkbox"/> Place of Employment <input type="checkbox"/> Member <input type="checkbox"/> Former Member <input type="checkbox"/> Friend/Family <input type="checkbox"/> Medical referral	<input type="checkbox"/> Aerobics-Group Ex. <input type="checkbox"/> Spinning <input type="checkbox"/> Strength Training <input type="checkbox"/> Sports <input type="checkbox"/> Summer Camp <input type="checkbox"/> Resident Camp <input type="checkbox"/> Child Care <input type="checkbox"/> Coaching <input type="checkbox"/> Parent-Child Programs <input type="checkbox"/> Teen Activities <input type="checkbox"/> Senior Programs <input type="checkbox"/> Social Activities <input type="checkbox"/> Family Recreation <input type="checkbox"/> Volunteerism <input type="checkbox"/> Fundraising <input type="checkbox"/> Board Member <input type="checkbox"/> Aquatics

Name (Last if different)	Birthdate	Sex	Race	Employer / School
2nd Adult				
Children				

Office Use Only	Join Date: Enrolled by:	Method of Payment: Check___ Cash___ Credit Card___	Perry Resident Program: \$50 2016 OFC Membership Rates (tax not included) OFC Family: \$235 OFC Adult: \$135 OFC Youth: \$90
	Membership Type: PERRY	Fee Charged: _____ Date___ Staff ___	

Inexpensive summer fun for you and your family!

Perry Township/YMCA Outdoor Family Center Summer Program

The Perry Township Trustees and Lake County YMCA invite you to another fun-filled summer at the YMCA Outdoor Family Center! If you and your family are permanent residents in the Perry Local School District, you're eligible for this summer program. **Sign the bottom of this page**, complete the registration application on the **reverse side** and return it with the \$50 registration fee and proof of permanent township residency to:

YMCA OFC, 4540 River Road, Perry OH 44081. Call 259-2724 for more information!

When you sign-up for the program you will enjoy member privileges at the Outdoor Y **from May 28 through September 5, 2016** -- seven days a week! This includes the Family Aquatic Center featuring 2 aqua climbing walls, our in-line skating rink, outdoor racquetball & tennis courts, playground, picnic areas and our 5 miles of nature hiking trails! \$50 for the entire family for the entire summer! This is over a \$185 savings thanks to the generosity of the Perry Township Trustees, who cover the difference to provide great summer opportunities for families in the Perry area!

Register before the May 28 pool opening and you can use your Perry Program Pass over Memorial Day weekend! Membership cards require photos. If you are renewing a membership and have your old member tags, these will be reactivated, If you need new tags feel free to stop by the Outdoor Y before the opening of the pool to avoid the lines.



**SAVE TIME...SIGN
UP ONLINE!**

www.theoutdoorymca.org

Try Us! . . The Summer Splash Day - June 11th
Swimming is free all day!

Check us out at: www.theoutdoorymca.org

YOU BELONG

With the Y, you're not just a member of a facility; you're part of a cause. With a focus on developing the potential of kids, improving individual health and well-being, and giving back and supporting our neighbors, your membership will bring about meaningful change not just within yourself, but in your community, too.

Y MISSION STATEMENT

To put Christian principles into practice through programs that build healthy spirit, mind and body for all.

CONDITIONS OF MEMBERSHIP

All members are required to present a current, valid membership card when using the YMCA's facilities and programs. Membership cards are not transferable. As a member of the YMCA, you are agreeing to follow the policies, procedures and appropriate behaviors for the safety and comfort of all members and guests. A copy of the Lake County YMCA General Policies can be obtained from your local YMCA branch.

DISCLAIMER/HOLD HARMLESS STATEMENT

I/we understand that there is a risk of serious injury associated with the use of the YMCA facilities, participation in YMCA programs and use of exercise and other equipment. As a condition of my membership I agree to assume the risk of injury arising from my use of the facilities, programs, equipment and for all other matters at all YMCA locations or program whenever occurring. On behalf of myself and my heirs, administrators and executors, I hereby release and hold the YMCA and its officers, trustees, employees, agents and contractors harmless from all such claims for injury and damage. I understand that I would not be permitted to participate in any YMCA program or use any YMCA facility or equipment without this agreement.

I authorize the Lake County YMCA or its designees, agencies and contractors to create, have and use photographs, slides and videotapes containing my image for its record keeping or marketing/public relations programs.

In the event of reasonable attempts to contact me have been unsuccessful, I hereby give my consent for any minors named on the application to be transferred to any hospital reasonably accessible. Facts concerning the child's medical history, including allergies, medications being taken, and any physical impairments to which a physician should be alerted, are:

I understand that the Lake County YMCA is not responsible for personal property lost, damaged, or stolen while members and/or program participants are using YMCA facilities, on YMCA premises, or involved in YMCA programs.

I/we have read and understand the mission statement, conditions of membership, and disclaimer/hold harmless statement above. In addition, I/we understand and agree that the conditions of membership and the disclaimer/hold harmless statement are in effect throughout my membership with the Lake County YMCA. I/we also understand and agree that if the membership is interrupted for any reason, these agreements will remain in effect during the period of interruption as well as after the membership is reinstated.

SIGNATURE _____ DATE _____
(Applicant) Parent must sign for minors

SIGNATURE IS REQUIRED TO RECEIVE YOUR MEMBERSHIP CARD