

YMCA of Georgia's Piedmont Membership Card



Last Name: _____
 First Name: _____
 Address: _____
 City/State: _____ Zip: _____
 Birth Date: _____ Gender: M / F
 Home Phone: _____
 Alt Phone: _____

Additional Family Members:

Last Name: _____ Last Name: _____
 First Name: _____ First Name: _____
 Birth Date: _____ Birth Date: _____
 Gender: M / F Gender: M / F

Last Name: _____ Last Name: _____
 First Name: _____ First Name: _____
 Birth Date: _____ Birth Date: _____
 Gender: M / F Gender: M / F

Last Name: _____ Last Name: _____
 First Name: _____ First Name: _____
 Birth Date: _____ Birth Date: _____
 Gender: M / F Gender: M / F

*Family members claimed under a family membership must be under the age of 21 still living in the home and claimed for tax purposes by the head of the household, or in custodial care by legal guardians. ID is required.

YMCA BANK DRAFT MEMBERSHIP AGREEMENT

1. Bank draft membership are a continuous plan and will stop only when a request is received in writing by the YMCA Membership Director.
2. It is to my complete understanding that if I wish to terminate **I MUST GIVE THE YMCA 30 DAYS WRITTEN NOTICE.**
3. The YMCA Board of Directors may, at their discretion, adjust the monthly rate applicable to my category of membership. I understand that I will receive at least 4 weeks notice prior to any such changes.
4. Should any membership draft not be honored by my bank for any reason, I realize that I am still responsible for payment to the YMCA plus a \$25.00 service charge applied by the YMCA. This is in addition to any service fee my bank may charge.

Signature of Bank Depositor _____

I hereby authorize the YMCA of Georgia's Piedmont to debit my bank account at _____ for monthly membership payments as shown below. I understand and agree to the terms of a Bank Draft membership as indicated by signing above.

Bank Depositor name if different (Please Print) _____

Date of Monthly Withdrawal: 1st 15th Monthly Payment: _____	Type of Membership: _____ Amt Paid: _____ Staff Initials: _____
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CONDITIONS OF MEMBERSHIP

All members are required to present a valid membership card for identification when using YMCA facilities and programs. Membership privileges and cards are not transferable, remain the property of the YMCA of Georgia's Piedmont, and must be returned upon request. The YMCA reserves the right to refuse or revoke any membership. Membership is continuous based on the method of payment. I agree to return all applicable membership cards upon cancellation and understand that I will receive a temporary card for the remainder of my membership for which I have paid or will be paying.

PARTICIPANT WAIVER

- As a participant in programs offered through the YMCA of Georgia's Piedmont for either myself or my child, the undersigned acknowledges and agrees to the following:
1. The YMCA is a Christian organization and that my child and I are expected to conduct ourselves in accordance with the teachings of Jesus Christ.
 2. I give my permission to the YMCA of Georgia's Piedmont for the use of photos and slides that may be taken of my child or of myself and to use, without limitation or obligation, photographs, film footage, or tape recordings which may include either my image or voice or the image and voice of my child for purposes of promoting or interpreting YMCA programs.
 3. I understand the YMCA of Georgia's Piedmont assumes no responsibility for injuries or illness which I or my child may sustain as a result of physical condition or resulting from participation in any athletic activities, sports programs, the use of any equipment, exercises, or other activities while on the property of or in conjunction with any activity held, coordinated or sponsored by the YMCA of Georgia's Piedmont. In consideration of the privilege of participation at the YMCA, I hereby voluntarily release and discharge the YMCA of Georgia's Piedmont, its officers, directors, employees, agents, and/or servants from any claims whatsoever, including for injury, illness, death, loss or damage which I or my child may suffer as a result of my/his/her participation in these activities. I understand that no accident or medical insurance is provided with these activities. I fully indemnify and hold harmless the YMCA of Georgia's Piedmont, its officers, directors and employees from any and all claims.
 4. I understand the YMCA of Georgia's Piedmont is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities, participating in YMCA activities, or on YMCA premises.
 5. While the YMCA of Georgia's Piedmont will make every attempt to provide reasonable accommodations for mentally and physically challenged children and adults, the YMCA will not accept children or adults that are (a) of danger to themselves, (b) of danger to others, or (c) a disruption to the normal activities making it unreasonably difficult for other children or adults to enjoy YMCA programs and activities. Any of the above reasons will be grounds for dismissal from YMCA programs and activities. We strongly recommend that you discuss with YMCA of Georgia's Piedmont staff any special conditions or circumstances involving your child or an adult member in your household. We request that you do this PRIOR to registration so that we can advise you as to whether we can make a reasonable accommodation for your child or adult household member.

ACCEPTANCE

I have read and voluntarily signed this **waiver and release** of liability and **indemnification** agreement, and further agree that no oral representation, statements or inducements apart from the foregoing written agreement have been made. I also accept the Conditions of Membership as well as the conditions imposed upon participants, both youth and adult, in activities and programs provided by the YMCA of Georgia's Piedmont.

Signature of Member/Participant Date

Signature of Parent/Guardian Date
(if member under the age of 18)

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