



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA OF GREATER LONG BEACH

P.O. Box 90995 Long Beach, CA 90809-0995

MEMBERSHIP - Registration Form

Branch: Fairfield Family YMCA Los Altos Family YMCA Weingart-Lakewood Family YMCA

Type of Membership (Please check one)

- 1 Adult Household Adult Teen & Young Adult SilverSneakers®
 2 Adult Household Senior (62+) Senior Couple Silver&Fit®

Primary Member (Please Print)

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth: ____/____/____ Gender: Male / Female Ethnicity: _____ Marital Status: _____
(Optional)

Home Address: _____
Street Unit# City State Zip Code

Primary Phone: _____ Work Phone: _____

Secondary Phone: _____ E-mail: _____

Emergency Contact: _____ Phone: _____ Relationship: _____
First Name Last Name

Employer: _____ Title: _____

Business Address: _____
Street Unit# City State Zip Code

Parent/Spouse Information (Parent Information is required for all members under 18 years of age)

Last Name: _____ First Name: _____ Middle Initial: _____

Date of Birth: ____/____/____ Gender: Male / Female Ethnicity: _____ Marital Status: _____
(Optional)

Home Address: _____
Street Unit# City State Zip Code

Primary Phone: _____ Work Phone: _____

Secondary Phone: _____ E-mail: _____

Emergency Contact: _____ Phone: _____ Relationship: _____
First Name Last Name

Employer: _____ Title: _____

Business Address: _____
Street Unit# City State Zip Code

Additional Family Members (Please Print)

Please list ALL immediate Family Members under the age of 19 to be included on the membership:

	Last Name	First Name	Gender	Date of Birth	E-mail
1.			M / F	/ /	
2.			M / F	/ /	
3.			M / F	/ /	
4.			M / F	/ /	
5.			M / F	/ /	

How did you hear about the Y?

- Yellow Pages Direct Mail E-mail Employer Family Former Member Billboard Internet
 Live in the Area Newspaper Radio Member Friend Medical Referral Television Magazine
 YMCA Website Other: _____



**YMCA OF GREATER LONG BEACH
RELEASE AND WAIVER OF LIABILITY
AND INDEMNITY AGREEMENT**

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HERBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, and/or branch affiliates, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned of such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by negligence of the releasees or otherwise.
3. THE UNDERSIGNED HERBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasee or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements of inducement apart from the foregoing written agreement have been made.

I give permission for the YMCA to use any pictures taken for future promotion purposes.

I HAVE READ AND UNDERSTAND THIS RELEASE

First Applicant Name

Signature of first Applicant/Parent

Second Applicant/Parent Name

Signature of second Applicant/Parent

Date

Date

Name of Child - Member

Name of Child - Member

Electronic Funds Transfer (EFT) Authorization Form

Electronic Funds Transfer (EFT) is the automated monthly deduction from your credit card, checking or savings account to pay for your Y Membership. Checking /savings account, or credit card information is required to process your EFT payment. To authorize the monthly deduction you must complete this Membership Application and fill out the checking / savings, or credit card information below. The Y will process your paperwork and notify your bank.

- Please check if you would prefer to pay your membership dues at the Welcome Center or online quarterly, semi-annually, or annually. Skip the section below and proceed to Membership Account Policies.

Account Holder Information:

Name as it appears on check/credit card: _____

Home Address: _____
Street Unit# City State Zip Code

Financial Information (choose one): Primary Phone: _____

Checking / Savings

Financial Institution: _____

Last 4 Digits of Account Number: _____

Routing Number: _____

Credit Card

Card Type: Visa / MasterCard / AmEx / Discover

Last 4 Digits of Card: XXXX - _____

Expiration Date: _____ / _____

Please Initial Drafting Date: EFT deductions will be taken out on the **1st of each month**. The YMCA reserves the right to re-attempt an EFT deduction within 15 days if the bank draft or credit card returns due to insufficient funds or any other reason.

Membership Account Policies

Please Initial:

Account Changes: You must notify the Y in advance of any membership updates, holds, or bank account or credit card changes. Please notify the Y, **in writing, on or before the 25th of the month prior to your draft or renewal date** to be processed in time of the requested change.

Payment Returns & Unpaid Balances: All bank drafts or credit cards returned due to insufficient funds, closed accounts, or any other reason will be **charged a \$20 processing fee**. Members are denied YMCA access if they have an unpaid balance due on their account.

Cancellations: Memberships may be cancelled at any time provided that you notify the Y, **in writing, on or before the 25th of the month prior to your draft or renewal date** to be processed in time of the requested cancellation date. Any membership cards must be returned at this time. Cancellations may NOT be processed over the phone. I further understand that canceling my membership does not relieve me of the responsibility of paying my account in full.

YMCA membership changes: Membership categories and fees are subject to change. The Y will make attempts to notify all members in advance of any adjustments/changes made.

I understand the above information and agree to the terms. I understand that I am responsible for delinquent payments and additional charges made to the Y for returned drafts, declined credit cards, insufficient funds, change in account, or closed account.

I hereby authorize the YMCA of Greater Long Beach to initiate debits to my checking/savings or credit card account as indicated. I understand I need to submit membership change requests or cancellation notices, **in writing, on or before the 25th of the month prior to my draft or renewal date**. All memberships are NON-REFUNDABLE and NON-TRANSFERABLE.

Signature of Account Holder

Date



Mission Statement

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

Values Statement

The character development values that we aim to teach – honesty, respect, responsibility, and caring – are the values that guide the behavior of our YMCA. We will be a membership organization that involves all members of the family in a long-term relationship – as participants, volunteers, leaders, and benefactors. Our YMCA will be a model of the kind of world it aims to create: positive, just, inclusive, charitable and loving.

Financial Statement

We expect our members to pay a fair share of operating costs. Participants who are not able to pay the full fee may be awarded partial financial assistance based on their demonstrated ability to pay and the Y's ability to fund the subsidy. Application forms are available at the member services desk.

Participation Agreement

I hereby give the YMCA of Greater Long Beach permission with respect to photographs, videos, motion pictures, written stories and/or sound recordings being taken of myself or my dependents to use, publish, and republish in the same, in whole or in part, on the YMCA website or in YMCA printed materials, separately or in conjunction with other photographs or recordings. I hereby release and discharge the YMCA of Greater Long Beach from any claims and demands arising out of or in connection with the use of such photographs, videos, motion pictures, written stories and/or sound recordings.

Member Behavior Statement

The YMCA of Greater Long Beach is founded on Judeo-Christian values and prohibits inappropriate behavior and conduct. This includes, but is not limited to, profanity or abusive language, attire, smoking, use of alcohol or drugs, the removal of YMCA property, criminal conduct of any type past or present, or any other behavior considered to be contrary to the Mission, Vision and Values of the YMCA. The YMCA of Greater Long Beach reserves the right to conduct background checks on its members. Inappropriate behavior or conduct is unacceptable and the YMCA consequently retains the right to deny memberships to its applicants and to revoke a membership of any current member or participant at its sole discretion.

Wellness Center Rules

The YMCA is a family association requiring suitable sports clothing. Shirts and closed-toe shoes must be worn at all times. No food or beverages are allowed in fitness areas. *Water bottles are permitted.* Smoking is prohibited throughout the facility. The possession or use of drugs, alcohol, illegal substances or weapons is prohibited. Threatening and/or violent behavior will not be tolerated. Removal of YMCA property or the property of others will result in termination of facility use privileges and legal prosecution. Lack of respect to staff or member will result in suspension or termination of facility use privileges. Children under the age of 12 are not permitted in fitness areas. Children under 16 years of age must be supervised by an adult or registered in a Y program or activity.

The YMCA of Greater Long Beach is not responsible for lost, stolen or damaged articles.

I have read and agree to the above statements and rules.

Signature _____

Date _____

OFFICE USE ONLY

Date: _____ Staff Initial: _____ Monthly EFT / Quarterly / 6-Month / Annual

Unit ID#: _____ Amount Paid: _____ Tour Given? Yes / No (if no why?) _____

Financial Aid: Yes / No FA%: _____ Waiver Signed: Yes / No Wellness Orientation Requested? Yes / No

Notes: _____
