



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

St. Cloud Area Family YMCA

2001 Stockinger Drive

St. Cloud, MN 56303

MEMBERSHIP APPLICATION

Fitness Coaching Offered: _____

Membership Type:

Unit ID #

ADULT MEMBER (PLEASE PRINT)

First Name		Last Name		Gender:
Street Address				<input type="checkbox"/> Photo
City		State	Zip Code	
Primary Phone (Including Area Code)		Employer/School	Date of Birth (MM/DD/YYYY)	
E-Mail				
Emergency Contact: Name		Phone:	Relationship:	

ADDITIONAL HOUSEHOLD MEMBERS (PLEASE PRINT)

First Name	Last Name	Employer or School	Date of Birth	Gender	YMCA Use Only
					<input type="checkbox"/> Photo
					<input type="checkbox"/> Photo
					<input type="checkbox"/> Photo
					<input type="checkbox"/> Photo
					<input type="checkbox"/> Photo
					<input type="checkbox"/> Photo

Would you like to add any of the following optional services at this time?

Service	Monthly Cost	Household Member(s)	Staff Use: Pro Rate
<input type="checkbox"/> KidZone; Single Child	\$14.75	_____	_____
<input type="checkbox"/> KidZone; Multi Child	\$19.75	_____	_____
<input type="checkbox"/> Towel Service(per member)	\$6.00	_____	_____
<input type="checkbox"/> Locker Service(per Locker)	\$15.00	_____	_____

Member Behaviors and Waivers

Membership Waiver

By participating in the YMCA National Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, including without limitation, the St. Cloud Area Family YMCA from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, services provided by or through YMCA facilitation or the YMCA and from any liability for other claims, including loss of property, to the fullest extent of the law.

Photo and Video/Audio Recording Release

I hereby give my permission and consent, now and for all time, to the St. Cloud Area Family YMCA, the National Council of Young Men's Christian Associations of the United States of America (YMCA of the USA) and third parties collaborating with the St. Cloud Area Family YMCA and/or YMCA of the USA to make, reproduce, edit, broadcast or rebroadcast any video film, footage, soundtrack, recordings and photo reproductions of myself, my dependents and/or my narrative account of my experience at St. Cloud Area Family YMCA, for publications, display, sale or exhibition thereof in promotions, advertising and legitimate business uses without any compensation to, and/or claim, by me. I may, or may not be identified in such reproductions; however, I shall not be stated by name to have endorsed any particular commercial products or commercial service. I further agree to the following:

- *Any video film, footage, soundtrack recordings, and photo reproductions of me and/or my narrative account of my experience during said activities, I authorize, according to this release, shall belong to YMCA of the USA and collaborating third parties. Therefore, they will have full right of disposition of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience within said activities;
 - * Any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience within said activities will not be subject to any obligation of confidentiality and may be shared with and used by YMCA of the USA and collaborating third parties;
 - * YMCA of the USA and collaborating third parties shall not be liable for any use or disclosure to a third party of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience; and
 - * YMCA of the USA and collaborating third parties shall exclusively own all known or later existing rights to and shall be entitled to the unrestricted use of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience for any purpose without compensation to me.
- I agree that my consent and this release are irrevocable. I hereby release and discharge YMCA of the USA and collaborating third parties from any and all claims in connections with the uses and reproductions of any video film, footage, sound track recordings and photo reproductions of me and/or my narrative account of my experience as described herein.

Sex Offender/Violent Offender Notice

The YMCA conducts regular sex offender screenings on all memberships, participants, and guests through various public databases. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access. I understand that it is the YMCA's policy to deny access to those who are listed as sex offenders. I understand that myself and my dependents will be screened through RAPTOR, or similar sex offender screening products and public databases from time to time, before and during my membership. If a sex offender match occurs, the YMCA reserves the right to cancel the membership, end program participation and remove visitation access. In addition, the YMCA reserves the right to deny access or membership to any person who has been convicted of any crime involving weapons, violence, sexual abuse, or the sale, possession and/or transportation of illegal drugs.

Refund Policy

Refunds will not be given for membership paid in advance. Program refund policies vary by program and need to be approved by the director in charge of the program in question.

Kid Zone Policy

Myself and me dependents will follow and abide by the posted and available Kid Zone Rules. I understand that there are fees associated with the use of Kid Zone services and a 2 hour per day time limit. While children are checked into Kid Zone, their adult(s) must remain in the building.

Membership Discount Policy

It is the policy of the YMCA to allow for one discount to be applied to Membership dues.

By signing below I verify that I have read and understand the above information as well as the Code of Conduct located on page 2 of this application. For the consideration herein, I hereby consent to the foregoing on behalf of myself and my dependents.

Date _____

Member Signature _____