



# Membership Application

Join Date \_\_\_\_\_ o Full Pay o Checkfree o other \_\_\_\_\_ Amount Paid \_\_\_\_\_

Type of Membership: o Family o Husband & Wife o Single Parent o Adult o Senior Citizen  
o SilverSneakers o Full Time College Student o Teen (13-18) o Youth (6-12) o Preschool (0-5)

(01) First Name \_\_\_\_\_ Last Name \_\_\_\_\_ o M o F

(02) First Name \_\_\_\_\_ Last Name \_\_\_\_\_ o M o F

(01) Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (02) Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail address \_\_\_\_\_

Your Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Spouses Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Emergency Contact #1 \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### Household Membership Information (List Last Name if Different)

#	Dependent/Children's Name	M/F	Birth Date	Relationship	School	Grade
03						
04						
05						
06						
07						

\_\_\_\_\_ By initialing, permission is **NOT** given to the Ashland YMCA to use a members photos/videos for promotional material either printed or web based.

In consideration of gaining membership or being allowed to participate in the activities and programs of the YMCA and to use its facilities, equipment, and machinery in addition to the payment of any fee or charge, I do hereby waive, release, and forever discharge the YMCA and its officers, agents, employees, volunteers, representatives, executors, and all others from any and all responsibilities or liability for injuries or damages resulting from my participation in any activities or my use of equipment or machinery in the above mentioned facilities or arising out of my participation in any activities at said facility. I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of the YMCA or the use of any equipment at the YMCA. I agree to adhere to all policies set by the YMCA as written in the YMCA Membership Handbook. By signing this agreement I am also signing for all the above listed participants.

All Memberships are non-refundable & non-transferable \_\_\_\_\_ (initial)

Signature \_\_\_\_\_ Date \_\_\_\_\_