

## Gladbrook Fitness and Wellness Center

Primary Payor	Date	First Name	MI	Last Name		
<b>H O M E</b>	Mailing Address			Marital Status		
				<input type="checkbox"/> Married	<input type="checkbox"/> Single	
	City		State	Zip		
<b>S P O U S E</b>	Primary Phone		Cell Phone		Gender	
			<input type="checkbox"/> Male		<input type="checkbox"/> Female	
Birthdate			E-Mail Address			
Employer Name			Employer Phone			
Emergency Contact Name			Phone		Relationship to Contact	
<b>S P O U S E</b>	First Name		MI	Last Name		
	Birthdate			Gender		
				<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Employer Name			Employer Phone			
<b>Dependents</b>						
First Name		MI	Last Name		Birthdate	Gender
<b>For Office Use Only</b>						
<b>Membership Type</b> <input type="checkbox"/> Family <input type="checkbox"/> College <input type="checkbox"/> Single <input type="checkbox"/> Senior			<b>Initial Payment</b> <input type="checkbox"/> Check <input type="checkbox"/> Cash		<b>Payment Method</b> <input type="checkbox"/> Annual <input type="checkbox"/> Bank Draft	
Fee-Annual/Monthly _____ Less Contribution _____ Activation Fee _____ Add'l Cards _____ Sales Tax _____ Other _____ Total Paid _____			Start Date _____ End Date _____  <b><u>Access Numbers</u></b> _____ _____ _____		Monthly Fee(s) Date of Draft (Circle One) 1st      15th      25th  <u>Monthly Amount</u> \$	

## Waiver

\_\_\_\_\_ (Initials) I wish to participate in the Gladbrook Fitness and Wellness Center membership/program activities, and if initialed wish my children or legal wards to participate and give them permission to participate in the fitness center activities. As used in this Agreement "children" shall include legal wards and "parent" shall include legal guardian. As a condition to being permitted to utilize the facilities and services of the fitness center for any purpose including but not limited to observation or use of the facilities or equipment, I, the undersigned, acknowledge, agree, and represent that I have inspected and carefully considered the facilities. I understand that even when every reasonable precaution is taken, accidents can happen. As a condition to participation by me or my children in fitness center activities, on my behalf of my children, I waive and release any claims for loss or injury incurred or suffered which I or my children might make against the fitness center, its sponsors, officers, or volunteers as a result of participating in fitness center activities or using its facilities. I further agree to indemnify the fitness center against and hold it harmless from loss incurred as a result of claims against it based upon alleged actions or omissions by me or my children. I have read this authorization, waiver, and release, understand it, and am voluntarily signing it.

\_\_\_\_\_ (Initials) I understand that the Gladbrook Fitness and Wellness Center is not responsible for personal property lost, damaged, or stolen while members are using the fitness center facilities, on the fitness center premises, or involved in fitness center programs.

## Membership Agreement

\_\_\_\_\_ (Initials) If my membership dues are paid through Electronic Funds Transfer, I understand this is a continuous membership plan. This membership will remain in effect for as long as I retain the membership card issued to me. Membership cards are the property of the fitness center and must be surrendered upon demand.

\_\_\_\_\_ (Initials) It is my complete understanding that if I wish to terminate or change my membership in any way, I must have the proper paperwork filled out, and returned to the Gladbrook City Clerk by the 20th day of the month to change or cancel my membership for the following month's draft date.

\_\_\_\_\_ (Initials) All membership rates are subject to change if rates increase or change in type of membership occurs. I understand it is my responsibility to notify the fitness center of any change in address, bank account information (if utilizing bank draft for payment of dues). Otherwise I will be responsible for any fees that are charged by my bank and or the fitness center, if this situation should arise. A \$25 non-sufficient fund fee will apply.

\_\_\_\_\_ (Initials) The activation fee is a one-time fee as long as I remain an active member of the Gladbrook Fitness and Wellness Center. If I choose to cancel or discontinue my membership for more than 30 days, the activation fee will be charged when I reapply for membership.

\_\_\_\_\_ (Initials) I acknowledge the waiver and membership agreement set forth above, and the receipt of the rules for the fitness center and agree to abide by said rules and hereby apply for membership.

## Electronic Funds (EFT) Authorization

I authorize my bank to honor preauthorized Electronic Funds Transfer against my account for membership payments as indicated below. When the bank honors the EFT by charging my account, such transfer shall constitute notice of payment due and my receipt for the payment. Should any preauthorized EFT not be honored by said bank when received by them, then it is understood that payment is to be made by me in the amount of said payment plus service charge. It is further understood that if such payment is not honored by the bank, the fitness center, at its discretion, may resubmit the amount due for payment on a future date. Please attach a copy of voided check or savings deposit slip.

I choose to utilize the EFT option for monthly payment (direct debit from  Checking  Savings)

Bank Name: \_\_\_\_\_ Name on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_