Gladbrook Fitness and Wellness Center

Primary Payor	Date	First Nan	ne	MI		Last Nar	ne	
	Mailing A	Address				Ma	arital Stat	us
H						Married		Single
0	City			State			Zi	ip
M								
\mathbf{E}	Primary I	Phone		Cell Phone		Male	Gender	Female
Birthdate					E-Mail	Address		Temate
Employer Name				Employer Phone				
Emergency Contact Name			Phone Relatio			onship to Contact		
S P	First Nan	ne		MI		Last Nar	ne	
O	Birthdate	· ,			Gei	nder		
\mathbf{U}					Male		Female	
S E	Employe	r Name			Employe	er Phone		
				Dependent	S			
First	Name	MI	I	Last Name	Birthdat	e	Gender	School
				For Office Use				
_	Members			Initial Paym	ent	Payment	Method	
	Family		College Senior	Check Cash			Annual Bank Draf	C4
	Single		Semor	Start Date			Dank Drai	<u> </u>
Fee- Annu	al/Monthly			End Date		1	Monthly	y Fee(s)
Fee-Annual/Monthly Less Contribution					Monthly Fee(s) Date of Draft (Circle One)			
Activation		-		Access Numb	oers	1st	15th	25th
Add'l Car				TICCOSS I (GIII)	<u>, (15</u>	150	1001	25 111
Sales Tax							Monthly	Amount
Other						\$		
Total Paic	l							

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
	a condiiton 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.
Member	ship 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 activiation 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
below. Who my receipt f understood t if such payn	by bank to honor preauthorized Electronic Funds Transfer against my account for membership payments as indicated in the bank honors the EFT by charging my account, such transfer shall constitute notice of payment due and or the payment. Should any preauthorized EFT not be honored by said bank when received by them, then it is not payment is to be made by me in the amount of said payment plus service charge. It is further understood that ent is not honored by the bank, the the fitness center, at its discretion, may resubmit the amount due for payment ate. 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 Nan	e: Name on Account:
Routing N	umber:Account Number:
Authorize	1 Signature: Date: