

Greater Somerset County YMCA Membership Application

□ Bridgewater YMCA □ Hillsborough YMCA □ Princeton YMCA □ Somerset Hills YMCA □ Somerville YMCA

PLEASE SELECT TYPE OF MEMBERSHIP*:

Adult 🗆 Family 🗆 Family Plus 🗆 Single Parent Family 🗆 Senior 🗆 Senior Couple 🔤 Youth I 🔅 Youth 2 🔅 Youth 3 🗇 Teen 🗠 Young Adult

Other

Unit Number (for office use only)

*If member is under 18, parent/guardian must complete and sign application.

PRIMARY ADULT (OR PARENT/GUARDIAN FOR APPLICANT UNDER 18 YEARS OF AGE):

First Name			Last Name				
Preferred Name		Date of Birth	— □ Female	□ Male [□ Rather not say	Additional Ider	ntity (option to specify
□ Asian/Pacific Islander □ Alaskan Native □ African American/Black □ Hispanic/Latino		□ Native American □ Unspecif □ Caucasian/White □ Other		ied			
Address						Apt. #	
City			State		Zip		
Phone: Mobile		Primary email address for registration & communication (we will never disclose your information for any non-YMCA related use)					
Employer							
Employer Emergency Contact						Phone: 🗆 Home	Mobile
Emergency Contact	SECOND ADULT M	EMBER (INCL	UDED IN	I FAMIL	Y MEMBE		□ Mobile
Emergency Contact	SECOND ADULT M	EMBER (INCL	UDED IN	I FAMIL	YMEMBE		Mobile
Emergency Contact	ECOND ADULT M		Last Name			RSHIP):	
Emergency Contact S First Name	SECOND ADULT M	Date of Birth	Last Name		□ Rather not say □ Unspecifi	RSHIP):	
Emergency Contact First Name Preferred Name Asian/Pacific Islander	□ Alaskan Native □ Hispanic/Latino	Date of Birth	Last Name — Female re American asian/White	□ Male □	□ Rather not say □ Unspecifi □ Other	RSHIP):	tity (option to specif <u>y</u>
Emergency Contact Eirst Name Preferred Name Asian/Pacific Islander African American/Black	□ Alaskan Native □ Hispanic/Latino	Date of Birth	Last Name — Female re American asian/White		□ Rather not say □ Unspecifi □ Other	RSHIP):	tity (option to specify)
Emergency Contact Emergency Contact First Name Preferred Name Asian/Pacific Islander African American/Black	□ Alaskan Native □ Hispanic/Latino	Date of Birth	Last Name — Female re American asian/White	□ Male □	□ Rather not say □ Unspecifi □ Other	RSHIP):	tity (option to specify

CHILDREN (23 & UNDER) OR ADDITIONAL ADULT MEMBERS (24+)

*If member is under 18, parent/guardian must complete and sign application. For Family Plus Memberships: additional adult members cost \$35/month/person.

First Name	MI	Last Name	Preferred Name
_		_	Freielteu Nallie
Date of Birth	□ Male □ Rather not say	Additional Identity (option to specify)	Email address
Asian/Pacific Islander	🗆 Alaskan Native	□ Native American	Unspecified
African American/Black	□ Hispanic/Latino	Caucasian/White	□ Other
	•		
		- <u> </u>	
First Name	MI	Last Name	Preferred Name
	□ Male □ Rather not say		
Date of Birth		Additional Identity (option to specify)	Email address
Asian/Pacific Islander	🗆 Alaskan Native	Native American	□ Unspecified
African American/Black	□ Hispanic/Latino	□ Caucasian/White	Other
First Name	MI	Last Name	Preferred Name
Enternale Enternale	□ Male □ Rather not say	□	
Date of Birth	····/	Additional Identity (option to specify)	Email address
Asian/Pacific Islander	🗆 Alaskan Native	□ Native American	□ Unspecified
🗆 African American/Black	□ Hispanic/Latino	□ Caucasian/White	Other
First Name	MI	Last Name	Preferred Name
	□ Male □ Rather not say	□	
Date of Birth	,	Additional Identity (option to specify)	Email address
🗆 Asian/Pacific Islander	🗆 Alaskan Native	□ Native American	□ Unspecified
African American/Black	🗆 Hispanic/Latino	Caucasian/White	Other
First Name	MI	Last Name	Preferred Name
	□ Male □ Rather not say		
Date of Birth		Additional Identity (option to specify)	Email address
Asian/Pacific Islander	Alaskan Native	□ Native American	Unspecified
🗆 African American/Black	🗆 Hispanic/Latino	Caucasian/White	□ Other
Emergency Contact (for Child	1-5)*		Phone: 🗆 Home 🗆 Mobile
*If other than Primary or Secon	d Adult Manshau an Daga 1		

- Wellness

 Active Older Adults
 Cycling
 General Health
 Group Exercise
- Personal Training
 Sports: Adult
 Sports: Youth
 Strength Training
 Triathletes/Endurance
 Weight Loss
- Aquatics
 Swim Lessons
 Private Swim Lessons
 Lap Swim
 Water Exercise
 Swim Team
- Other Description: Descripti

Programs
Dance / Team
Granily Recreation
Gymnastics / Team
Parent-Child
Special Needs
Teen Activities

 Teen Civic Engagement
 Youth Enrichment (STEM, art, dance, music theatre)
 Child Care
 Daycare & Preschool
 Before/After School Care
 Summer Camp

RELEASE AND HOLD HARMLESS AGREEMENT

Attention: Please read carefully as this Agreement affects you and your family's legal rights.

GENERAL RELEASE, INDEMNIFICATION AND HOLD HARMLESS: In consideration of being permitted to utilize (as a member, participant, quest or volunteer) the facilities, services and programs of Greater Somerset County Young Men's Christian Association, Inc. (YMCA) for any purpose (including, but not limited to observation or use of facilities or equipment, or participation in any program or event affiliated with the YMCA, without respect to location) I, the undersigned, and my Parent/Guardian, if applicable, do hereby release, indemnify, hold harmless the YMCA, all directors, officers, employees, volunteers, agents, independent contractors and other participants (collectively "YMCA & Affiliates") from any and all liability claims, demands, costs, expenses, and actions of any nature whatsoever arising out of or related to any loss, damage or injury, including death, which may be sustained by me, any members of my family, my guests of any age, or to property, whether or not caused by any negligence, either active or passive, by or on behalf of the YMCA & Affiliates.

ASSUMPTION OF RISK: I understand that participating in activities, as a participant, volunteer, or observer, exposes me to a risk of property damage, personal injury or death. I represent that I am in good health and have not been advised by a health care professional of any restrictions that would affect safe participation in any program or activity in which I elect to take part. I hereby agree to inspect and carefully consider such premises and facilities or the affiliated program immediately upon each occasion of entering or participating. I understand that my choice of participating in programs or activities is voluntary on my part, and I affirm my desire to participate in such program or activity. I agree to assume full responsibility for my safety, the safety of my family and guests, and the safety of my property while I am in or at the YMCA or an event or program affiliated with the YMCA, without respect to location.

MEDICAL RELEASE: In case of accident, injury, or illness of whatever kind or nature and however caused, and in the event my Emergency Contact as designated herein cannot be readily reached, I hereby authorize the YMCA & Affiliates permission to act on my behalf in seeking appropriate emergency medical treatment. I understand I am responsible for all fees and expenses that result from any such care and treatment rendered.

PHOTOGRAPHIC AND AV RELEASE: I hereby give permission and consent to YMCA & Affiliates to make incidental and occasional photographic, audio and video recordings in connection with participation in YMCA activities or programs and to utilize the same in any manner, and without any compensation to, and/or claim by me, my family or guests.

OTHER: The terms herein shall also serve as a release and assumption of risk by my heirs, successors, assigns and legal representatives, and all members of my family, and may be pleaded as a bar to litigation.

If any provision of this Agreement is deemed invalid by a court of competent jurisdiction, the invalidity of such provision shall not affect the validity of the remaining provisions of this Agreement, which shall remain in full force and effect.

CODE OF CONDUCT

The YMCA is a nonprofit organization that embraces the core values of caring, honesty, respect and responsibility. By joining the YMCA, you as a member are agreeing to subscribe to these operating values. If at any time your behavior does not support these values, the YMCA has the right to revoke your membership status.

- 1. Members are expected to comply with all YMCA policies as stated on our website at gscymca.org.
- 2. Membership card must be presented for admission. No privileges can be obtained without it.
- **3.** The YMCA is promoted as a safe and welcoming environment for all members and guests, therefore you shall:
 - Act appropriately at all times and in a mature and responsible manner.
 - Respect the rights and dignity of others.
 - Refrain from language or any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct.
 - Be responsible for your personal comfort and safety and ask any person whose behavior threatens your comfort to refrain. If you feel uncomfortable in confronting the person directly, report the behavior to a staff person, director or manager on duty.
 - All members/guests/visitors are required to provide a state or government issued photo ID upon joining/visiting.
 - The YMCA conducts regular sex offender screenings on all members, participants and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation and remove visitation access.
- 4. Prohibited actions specifically include:
 - Indecent attire.
 - Smoking and the use of e-cigarettes as the YMCA is a smoke free environment.
 - Verbally abusive behavior, including profanity, angry language, name-calling or shouting.
 - Physical contact with another person including pushing, shoving or roughhousing of any kind – that may pose a danger or threat of harm.
 - Any demonstration of sexual activity or sexual contact with another person.
 - Harassment or intimidation by words, gestures, body language or any menacing behavior.
 - Theft or behavior that results in the destruction of property.
 - Carrying or concealing any weapons or devices or objects that may be used as weapons.
 - Using or possessing illegal chemicals or alcohol on YMCA property, in YMCA vehicles or YMCA sponsored programs.
 - Using of video/photography devices throughout the facility except on Parent Observation days and at Special Events.
 - Any other conduct of any inappropriate, threatening or offensive nature.
- 5. Be mindful of personal hygiene. We reserve the right to ask a member to leave the facility if they exhibit an offensive odor.
- 6. Use of mobile devices in the Wellness area shall be limited to audio or video playback or reading applications.
- 7. Members and guests shall identify themselves to staff when asked.

MEMBERSHIP DUES & FEES

Memberships are non-refundable and non-transferable. Your monthly membership dues provide for daily operation of member services.

FAMILY PLUS MEMBERSHIPS

□ I understand that up to 4 additional adult members may be added to my Family Membership; each additional adult will add \$35 to my monthly membership rate.

AGREEMENT FOR MEMBERS PAYING BY AUTOMATIC DRAFT MONTHLY DRAFT ENROLLMENT

I understand that this is an on-going membership payment plan, and I may elect to pay by automatic draft. I understand if I elect to do so that my draft will processed on the **first of every month**, regardless of when it shows on my statement and I authorize Greater Somerset County Young Men's Christian Association, Inc. (YMCA) to initiate an Electronic Fund Transfer (EFT).

I understand that if I wish to terminate or change my membership in any way, I may do so by giving the YMCA a **30-day written notice** with completion of the Membership Edit Form. I **understand that this means I will still have ONE FINAL draft and be an active member after the date that I have signed the cancellation form.** I understand that my membership usage will expire 30 days from the final draft. I further understand a termination cannot be issued while a family member or individual is currently registered for or attending a program. Should any membership payment not be honored by my bank, for any reason, I realize that I am still responsible for the payment.

I understand that it is my responsibility to notify the YMCA in writing should I change my financial institution and/or account at any time. I understand that I can also change this information myself on my online account.

I understand that it is my responsibility to provide the YMCA with credit card/bank information throughout the term of my membership. Should the YMCA be unable to process my monthly EFT, it could result in the suspension of my membership.

The YMCA Board of Directors may, at their discretion, adjust the monthly rate applicable to my membership category. I understand that I will receive at least 30 days notice prior to such change.

□ I elect the monthly draft option.

ACCEPTANCE

(Must be executed for all members)

Member – I have read this Release and Hold Harmless Agreement, Code of Conduct, Membership Dues & Fees and Agreement for Members Paying by Automatic Draft. I understand and voluntarily accept the terms. Each Member and/ or Parent/Guardian, if Member is under 18, listed on pages 1 and 2 of the Membership Application, must sign here.

* If member is under 18, parent/guardian must complete application.

MEMBER NAME

(Include all listed on membership application)

Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
Signature	
Name	Date
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Name	Date
Signature	

GREATER SOMERSET COUNTY YMCA

140 Mount Airy Road, Basking Ridge, NJ 07920 | 908 630 3535

Greater Somerset County YMCA is a leading nonprofit committed to strengthening community by connecting all people to their potential, purpose and each other. The Y empowers everyone – no matter who they are or where they're from – by ensuring access to resources, relationships and opportunities for all to learn, grow and thrive. For information about Greater Somerset County YMCA and financial assistance, visit us at www.gscymca.org.

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gscymca.org