



Blair Regional YMCA Membership Application

Please print (clearly)

Method of Payment: *Monthly or Annual*

Annual: _____

E-Pay: 1st or 15th _____

Quarterly: *(must be paid in FULL)* _____

TYPE Membership: _____

Primary Name: (required to list adult name if under 18.)

First _____ Middle _____ Last _____

Additional names.

First _____ Last _____ Gender _____ DOB _____

First _____ Last _____ Gender _____ DOB _____

First _____ Last _____ Gender _____ DOB _____

First _____ Last _____ Gender _____ DOB _____

First _____ Last _____ Gender _____ DOB _____

First _____ Last _____ Gender _____ DOB _____

Address: _____

City, State, Zip: _____

Phone #: (home) _____ (cell) _____

Email: _____

Gender: _____

D.O.B. _____

Emergency Contact Name: _____

Emergency number: _____

Locker Rental: Yes or No? Annual or Monthly? Locker # _____

Volunteer: *we are always in need of volunteers* Yes or No _____

Release of Blair Regional YMCA from Liability

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, 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, death and sickness or disease, to include Covid-19 virus at said facility.

I do hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability from any injury or damage to myself, including those caused by the negligent act or mission of any of those mentioned or others, acting on their behalf or in any way arising out of connection with the participation in any activities of the YMCA or the use of any equipment of the YMCA.

By voluntarily signing below, I confirm that I am not and have never been registered as a sex offender nor convicted of a sexually based crime.

I agree to abide by the rules and regulations of the Blair Regional YMCA that are designed for the enjoyment of all members. I understand that participation in Y membership is a privilege and the YMCA reserves the right to revoke these privileges as necessary.

- ✓ **NO refunds on pre-paid memberships.**
- ✓ **Must give a full 30-day notice and will be charged 1 more payment to terminate membership.**

✓ *I have read and hereby voluntarily sign this authorization and release form.*

Signature: _____ **Date:** _____

Staff Initials: _____

Office use: (notes) _____