

Office Use Only		
Primary Last and First Name:	Staff Initials:	Date:

# MetroWest YMCA

## Membership Application

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Primary Member Information						
First Name	MI	Last Name	Gender	Date of Birth (MM/DD/YYYY)		
Ethnicity:			Preferred language:			
Email Address						
Street Address		City/Town		State	Zip Code	
Primary Member Phone #				# of People on your Membership?		
Family Member(s) Information						
First Name	MI	Last Name	Gender	Birth Date (MM/DD/YYYY)	Relationship (To Head of Household)	
2 <sup>nd</sup> . Adult 1.						
Children Under 18 2.						
3.						
4.						
5.						
6.						
➡	Emergency Contact	Name		Phone Number	Relationship	
How did you hear about us?						
Membership Type (Circle your membership type)	Youth	Teen		Young Adult	Adult	Senior
	Family of Two	Family 2+		Senior Couple	Senior Family	Hopkinton (FOC)
➡	Areas of Interest					

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	Wellness	Aquatics	Medical Wellness	Youth & Family Community
<input type="checkbox"/>	Personal Training			
<input type="checkbox"/>	Nutrition Counseling			
<input type="checkbox"/>	Weight Loss			
<input type="checkbox"/>	Fitness Assessments			
<input type="checkbox"/>	Body Composition Analysis			
<input type="checkbox"/>	Strength Training			
<input type="checkbox"/>	Youth Fitness			
<input type="checkbox"/>	Water Fitness			
<input type="checkbox"/>	Low-Impact Water Fitness			
<input type="checkbox"/>	Adult/Youth Swim Lessons			
<input type="checkbox"/>	Lap Lane Swimming			
<input type="checkbox"/>	Open Family Swim			
<input type="checkbox"/>	Diabetes Support Programs			
<input type="checkbox"/>	Parkinson's Exercise Classes			
<input type="checkbox"/>	Blood Pressure management			
<input type="checkbox"/>	Cancer Survivor Program (Livestrong)			
<input type="checkbox"/>	Children's Weight Management			
<input type="checkbox"/>	Senior Fall Prevention Program			
<input type="checkbox"/>	Y Nights (Grade 5-8)			
<input type="checkbox"/>	Adult Drop-In Sports			
<input type="checkbox"/>	Family Events			
<input type="checkbox"/>	Early Learning Center	Cooking Classes		
<input type="checkbox"/>	Volunteering			
<input type="checkbox"/>	Birthday Parties (FOC)			
<input type="checkbox"/>	CPR Certifications			

Payment Options	Annual (paid in full) <input type="checkbox"/>	Monthly <input type="checkbox"/>
Auto Charge (Credit/Debit Card)	Draft on (circle one) <u>1st</u> or <u>15th</u> of each month from the card ending in _____ (last 4 digits)	
OR		
Bank Draft (voided check needed)	Checking Account# _____ Routing# _____ Draft on (circle one): 1st / 15th	

**Metrowest YMCA Adult Participant Release & Waiver of Liability and Indemnity Agreement**

**PLEASE READ CAREFULLY. THIS DOCUMENT AFFECTS YOUR LEGAL RIGHTS AND IS LEGALLY BINDING. BY SIGNING THIS AGREEMENT YOU ARE RELEASING THE METROWEST YMCA FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE**

**Assumption of Risk**

I acknowledge and agree that any use of Metrowest YMCA ("YMCA") facilities, services, equipment and premises ("Facilities") and any participation in YMCA programs and activities ("Programs") comes with inherent risks including, but in no way limited to: (1) moderate and severe personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease including, without limitation, COVID-19. I voluntarily accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being described in this document.

### **Waiver, Release, Indemnification & Covenant Not to Sue**

In consideration of the use of Facilities and participation in Programs I, the undersigned, agree that YMCA, its officers, directors, agents, employees, volunteers, insurers and representatives ("Releasees") will not be liable for any personal injury, property damage, disability, death, sickness or disease incurred by myself, my family members, dependents, or guests, including minors, however occurring including, but not limited to the negligence of Releasees. I understand that I will be solely responsible for any loss or damage including personal injury, property damage, disability, death, sickness or disease sustained from the use of Facilities and participation in Programs.

I further agree, on behalf of myself and any and all legal successors and proxies, to release and HEREBY **DO RELEASE, WAIVE AND COVENANT** NOT TO SUE Releasees from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I and any and all legal successors and proxies may have, now or in the future, against Releasees on account of personal injury, property damage, disability, death, sickness, diseases or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In further consideration of the use of Facilities and participation in Programs, I agree to **INDEMNIFY AND HOLD HARMLESS** Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs by myself, my family members, dependents or guests, including any minors.

### **Photo Release**

I allow the YMCA's use of my photo image, voice, and video in promotional materials and online posts unless specifically noted otherwise in writing. I understand the use of photo/video equipment by my child's host organization (school, organization, and program) or other participants from same organization is at that organization's discretion and not the YMCA's.

I understand the YMCA is dedicated to the development of all people regardless of age, gender, religion, income or ability. I also understand that our programs, services and facilities are designed to enhance the spiritual, mental, physical and social quality of life for our families, our communities and ourselves. I hereby certify that to the best of my knowledge my family and I are in normal health and capable of safe participation at the MetroWest YMCA. My family and I hold the YMCA harmless for all injuries, property damage, theft and lost or stolen articles incidental to the use of the YMCA facility including, but not limited to, physical activities in which my family and I engage. I also understand that the YMCA reserves the right to revoke memberships. I acknowledge that 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. I give my permission for the MetroWest YMCA to take photographs/videos of myself/my child while involved in the daily activities of the YMCA programs or special events. I understand that these photographs/ videos may be used for media purposes or in MetroWest YMCA videos, newsletter brochures, website, and other promotional vehicles.

\_\_\_\_\_  
Name (Print Clearly)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **METROWEST YMCA**

### **AUTOMATIC PAYMENT AUTHORIZATION AGREEMENT**

I understand that, if my membership is initially complimentary or paid for by a 3rd party, the below agreements will go into effect if I ever convert to a self-paid monthly drafting membership in the future.

I hereby authorize the MetroWest YMCA to initiate recurring debit entries/credit card charges to the bank/credit card account I use to start this membership. I understand that the debits/charges will be based on fees that are due and payable at the time of the transaction.

- The bank/credit card draft is a continuous membership plan. I understand that my membership will remain in effect permanently or until I initiate its termination in writing.

• I understand that if I wish to terminate or change my membership in anyway, I must give the MetroWest YMCA a 15 day written notice prior to my draft date.

• I understand that if I am, or a family member is, enrolled in a program or camp receiving member pricing, I understand that the YMCA will adjust that pricing to the nonmember rate if the membership is cancelled before the end of the program or camp.

• I understand that to place my membership on hold or downgrade my membership, I must provide a 15 day written notice ahead of my draft date.

• Membership fees for a membership that is cancelled before the end of the billing period will not be refunded.

• Should a draft not be honored by my bank for any reason, I understand that the YMCA will automatically resubmit the draft for payment. Your account may be charged a separate \$20 recovery fee by the credit card processor. If the draft is not honored on the re-submission, the amount of the draft will be immediately due and payable to the YMCA.

• I understand that YMCA's credit card processor will automatically update any expiring credit cards which are saved as the primary billing method for a recurring membership or payment plan.

• If my membership draft bounces and is not resolved within 30 days, the YMCA will terminate my membership until I have brought all payments up to date. I understand that any outstanding membership balances must be paid prior to reactivating my membership or taking part in YMCA programs or services.

• I authorize the YMCA to save my credit card or EFT payment information so that I can use it to pay for other Y programs or services in the future.

\_\_\_\_\_  
Name (Print Clearly)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## MEMBERSHIP RATE INCREASE AGREEMENT

I understand that, to keep pace with the cost of maintaining YMCA facilities, staff salaries, and other operational expenses over time, the YMCA may occasionally adjust the monthly rate it charges for my membership.

I agree to such future increases to my membership rate, understanding that I will receive at least 30 days notice, allowing me sufficient time to make changes to my membership, if I so choose, before the new rate goes into effect.

\_\_\_\_\_  
Name (Print Clearly)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## METROWEST YMCA

## CODE OF CONDUCT

The MetroWest YMCA is committed to providing a safe and welcoming environment for all members and guests. To promote safety and comfort for all, we ask individuals to act appropriately at all times when they are in our facility or participating in our programs. We expect persons using the YMCA to behave in a mature and responsible way, and to respect the rights and dignity of others. Our Code of Conduct does not permit language or any action that can hurt or frighten another person, or that falls below a generally accepted standard of conduct.

## PROHIBITED ACTIONS SPECIFICALLY INCLUDE:

- Inappropriate attire. Appropriate attire must be worn at all times.
- Angry or vulgar language, including swearing, name-calling or shouting.
- Physical contact with another person in any angry or threatening way.
- 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 at YMCA sponsored programs.
- Any other conduct of an inappropriate, threatening or offensive nature.
- Loitering is not permitted in or outside the YMCA.
- Smoking is not permitted in or outside the YMCA. The YMCA and its property is a smoke-free environment.
- Cell phone use, including texting, is prohibited except for in designated areas.
- The use of audio, camera, and video recording devices is prohibited in all MetroWest YMCA facilities. Those wishing to use audio, camera or video recording devices must receive written consent in advance from a designated YMCA Director.
- Allowing or assisting unauthorized persons' access to the facility is prohibited.

Members and guests are encouraged to be responsible for their personal comfort and safety, and to ask any person whose behavior threatens their comfort to refrain in a courteous and respectful manner. If a member or guest feels uncomfortable in speaking with the person directly, they should report the behavior to a staff person or the Building Supervisor on duty. YMCA staff members are eager to be of assistance. Members and guests should not hesitate to notify a staff member if assistance is needed. In order to be able to carry out these policies, we ask that members and guests identify themselves to staff when asked. The Branch Executive will investigate all reported incidents. Suspension or termination of YMCA membership privileges may result from a determination by the Branch Executive if in his/her discretion a violation of the YMCA Member Code of Conduct has occurred. By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

**I have read the entire document and my signature below is my agreement to comply with all parameters set forth above.**

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Name (Print Clearly)

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Signature

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Date