



**MEMBERSHIP APPLICATION  
WAYNE COUNTY YMCA**

LAST NAME

**MEMBERSHIP INFORMATION (PLEASE PRINT)**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
Address Street \_\_\_\_\_ Apt \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Preferred Telephone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Emergency Contact \_\_\_\_\_

**COMPLETE FOR FAMILY MEMBERSHIP ONLY (INCLUDE YOUR NAME ON LINE ONE.)**

Name ( First & Last)	Birth Date	Gender	Employer/ School
1.		<input type="checkbox"/> M <input type="checkbox"/> F	
2.		<input type="checkbox"/> M <input type="checkbox"/> F	
3.		<input type="checkbox"/> M <input type="checkbox"/> F	
4.		<input type="checkbox"/> M <input type="checkbox"/> F	
5.		<input type="checkbox"/> M <input type="checkbox"/> F	
6.		<input type="checkbox"/> M <input type="checkbox"/> F	
7.		<input type="checkbox"/> M <input type="checkbox"/> F	
8.		<input type="checkbox"/> M <input type="checkbox"/> F	

FIRST NAME

**BACKGROUND INFORMATION (THE FOLLOWING INFORMATION IS OPTIONAL & USED FOR STATISTICAL PURPOSES ONLY.)**

**Ethnic/Racial Background**

- Black or African American     Asian Pacific Islander     American Indian or Alaska Native  
 Hispanic or Latino     White     Other \_\_\_\_\_

**Annual Household Income**

- Under \$30,000     \$30,000-\$50,000     \$50,000-\$70,000     \$70,000 +

**MEMBERSHIP CATEGORY**

Family     Adult     Sr. Youth     Jr. Youth     Pre-K  
 Silver Sneakers # \_\_\_\_\_  
 Silver & Fit # \_\_\_\_\_  
 Visiting Member ID# \_\_\_\_\_  
Home Y \_\_\_\_\_ Telephone \_\_\_\_\_

EXPIRATION DATE:

**MEMBER CODE OF CONDUCT:** The Wayne County Y reserves the right to suspend or terminate membership for behavior not in accordance with our values such as:

- Using or possessing alcohol or illegal chemicals on Y property or at Y-sponsored programs
- Smoking on Y property – the Y and its property is a smoke-free environment
- Carrying or concealing a weapon or any device or object that may be used as a weapon
- Harassment or intimidation by words, gestures, body language, or any type of menacing behavior
- Physical contact with another person in an angry, aggressive, or threatening way
- Verbally abusive behavior, including angry or vulgar language, swearing, name-calling, or shouting
- Sexually explicit conversation or behavior; any sexual contact with another person
- Theft or behavior that results in the destruction or loss of property

**SEXUAL OFFENDER POLICY:** It is contrary to the mission of Wayne County Y to allow sex offenders employment, membership, guest privileges, participation or observation of programs, to loiter on Y property, or to have access to Y off-site activities. 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.

**MEDIA AGREEMENT:** Please be aware that we occasionally take photos and videos of our members participating in Y programs, using its facilities, or attending special events. Additionally, the Y may permit members of the media to take such pictures or record such videos in order to promote the Y's charitable mission and for other journalistic purposes or for use in our marketing materials. By signing this release, such person acknowledges that he or she has freely consented to be photographed, filmed, or otherwise recorded.

**WAIVER, RELEASE AND HOLD HARMLESS AGREEMENT**

In consideration for being permitted to utilize the facilities, services, and programs of the Y for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the Y, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the Y for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE Y FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE Y, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the Y, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the Y, without respect to location.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the Y premises or in any way observing or using any facilities or equipment of the Y or participating in any program affiliated with the Y whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about, or upon the premises of the Y and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the Y.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Pennsylvania and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY (Please Initial)**

Terms:       Monthly       Quarterly       Annual       Bank Draft       Financial Assistance

Amt Paid \$ \_\_\_\_\_      Payment Method \_\_\_\_\_      Receipt # \_\_\_\_\_      Exp. Date \_\_\_\_\_

\$ entered in QB \_\_\_\_\_      Data- QB \_\_\_\_\_      Membership Card \_\_\_\_\_      Uploaded to NWM \_\_\_\_\_