NORTHWESTERN CONNECTICUT Y

MISSION: The Mission of the Y is to build a healthy spirit, mind and body in children and adults through programs that foster caring, honesty, respect, and responsibility.

Primary Member Name:		_ CIRCLE	Male Female
Address	City:		
State: Zip: Email:	a	·-	
Date of Birth/ Home phone ()_	Cell I	^o hone)_	
(Place of Employment:	Work I	^o hone)_	
(Emergency Contact:	Emer. I	^o hone)_	
(Membership Type: ☐ Youth ☐ Teen ☐ Young Adult ☐ Family ☐ Couple ☐ Senior Couple	e 🗆 Staff 🗆 Otl	her	
Category: Facility Weekday Limited	Adult Weekday 🗆 We	ekender	□ Program
FOR COUPLE & FAMILY MEMBERSHI Name Relation			1BERS
1	/	Male	Female
2	/	Male	Female
3	//_	Male	Female
4	/	Male	Female
5	/	Male	Female
JOINING FEE: I AGREE to a minimum 12 month membership cancel my membership prior to 12 months, I will be required			_
I opt out of the minimum 12 month commitment and AGR	EE to pay a joining fee now. Ir	nitials	
MEMBERSHIPS: are available at reduced rates based on inco	ne by the generosity of our me	embers and th	he community.
FAMILY MEMBERSHIP: Provides adults, couples, parents ar There is a nominal fee for certain classes. The family mem the age of 22. Please refer to our membership qualification	bership is limited to two adult		· •
PROMOTIONAL PHOTO: I agree to allow the Northwest CT \	' to use my/our photo or videc	for promotic	onal purposes.
I must check the box and sign here if I do not want to ${\sf p}$	articipate		··
COMMITMENT: As a member of the Northwestern Connection the YMCA constitution, and any rules and regulations of the committees, and staff.			-
VOLUNTARY The Northwest CT YMCA is a non-profit orga This information is being collected solo	•		tions.
Ethnicity (Circle one): Asian Black Hispanic Native	American White Other (Specify)	Unknown
Household Income (Circle one): Under \$25,000 \$	25,000-\$50,000 \$50,00	00-\$75,000	\$0ver \$75,000
Number of people living in household:			

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENTS:

The signee on his or her behalf and behalf of mentioned family members accepts certain risks, which accompany participation in exercise or sports activities and understand that before undertaking such that I should consult a physician.

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purposes including, but not limited to observation or use of the facilities of equipment, or participation in any off-site program affiliated with the YMCA, the signee, for himself or herself and such participating family members and any personal representatives, heirs, and next of kin **HEREBYAGREESTOTHEFOLLOWING**:

THE SIGNEE, ON HIS OR HER BEHALF AND BEHALF OF SUCH FAMILY MEMBERS, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the signee or such family members and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the signee or such family members whether caused by the negligence of the releasees or otherwise while the signee or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.

THE SIGNEE 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 signee or such family members in, upon or about the YMCA premises to in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.

THE SIGNEE HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE to the signee or such family members due to negligence of release or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participation in any program affiliated with the YMCA.

THE SIGNEE further expressly agrees that the foregoing **RELEASE**, **WAIVER**, **AND INDEMNITY AGREEMENT** is intended to be as broad and inclusive as is permitted by the law of the State 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 SIGNEE HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statement or inducement apart from the foregoing written agreement have been made.

I HAVE READ THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENTS AND ATTEST THAT NO ONE LISTED ON THIS MEMBERSHIP IS A REGISTERED SEX OFFENDER.

PRINT NAME DRIVER LICENSE #	SIGNATURE OF APPLICANT/PARENT STATE	// Date Staff Init'l _	CHECK IF PARENT
Member ID #	OFFICE USE ONLY Membership Code		