



Application for YMCA Membership

First Name _____ MI. ____ Last _____ o M o F Birth Date ____ / ____ / ____

Spouse First Name _____ MI. ____ Last _____ o M o F Birth Date ____ / ____ / ____

Address _____

City _____ State _____ Zip Code _____ - _____

Home Phone _____ **E-mail Address** _____

Your Occupation _____ Employer _____

Spouse Occupation _____ Employer _____

Emergency Contact #1 _____ Relationship _____ Phone _____

Emergency Contact #2 _____ Relationship _____ Phone _____

Family Membership Information (List Last Name if Different)

Dependent/Children's Names	M/F	Birth Date	Relationship	School	Grade

To help us serve you better, please fill out the following information. This information is kept confidential.

How did you hear about the Y? o Newspaper o TV o Radio o YMCA Brochure o Member o Billboard o Internet o Other

What are looking to do most at the Y? _____

Income Level of Household: o Under \$30,000 o \$30,001 to \$50,000 o \$50,001 to \$70,000 o \$70,001 +

Ethnicity: o Asian o African-American o Hispanic o Latino o Caucasian o Other: _____

The YMCA is a volunteer-driven organization. We utilize volunteers in our programs such as YMCA Youth Swim Lessons, special events like YMCA Family Day, and facility projects like Annual Spring Clean-up. We can certainly use your help.

Would you like a staff member contact you regarding volunteer opportunities at this time? o Yes o No

If yes, what special skills do you have? _____ (e.g. carpenter, coaching, plumber)

What would area are you interested volunteering in? _____ (e.g. youth sports coach, facility, special events)

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 at said facility. I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any those mentioned or others, acting on their behalf or in any way arising out of or connected with my participation in any activities of the YMCA or the use of any equipment at the YMCA. I agree to adhere to all policies set by the YMCA. **All memberships are non-refundable or transferable.**

Signature _____ Date _____

Signature _____ Date _____

Join Date: _____ o Full Pay o E.F.T. o Other: _____

Type of Membership: o Family o Adult Individual o Youth o Senior o Other: _____
o Promotional membership o Basic o Complete Entered ____

Please consider making a donation to our "Reach Out For Youth" campaign. You can make a difference.
\$5 _____ \$10 _____ \$50 _____ \$100 + _____