

General Release of Liability and Authorization for Treatment

Authorization for Treatment: I hereby give permission to the medical personnel selected by the YMCA to order X-rays, routine tests, treatment, and necessary transportation for me or persons listed above. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the YMCA staff to secure and administer treatment, including hospitalization, for me or my family as named above. In consideration for being allowed to participate in the YMCA's programs, I agree to assume the risk of such activities and program, and I further agree to hold harmless the YMCA and its staff members conducting activities from any and all claims, suits, losses, or related causes of action for damages including but not limited to such claims that may result from injury or death, accident, or otherwise, during or arising in any way from the activities. I grant permission for me or my child(ren) to participate in all YMCA activities, including use of the Park, climbing wall, high ropes course, or hiking, understanding that competent leadership is provided. The YMCA is not responsible for lost, stolen, or damaged personal articles. I also authorize the YMCA to have and use photographs, slides, or videotapes of me, my child, my family, or my guests as may be needed for its public relations programs. I acknowledge that this General Release of Liability of the YMCA is binding on me personally and on my heirs, personal representatives, successors and assigns. I and the persons listed above agree to abide by all guidelines established by the YMCA in accordance with the principles of safety, honesty, caring, respect, and responsibility.

Signature of member or parent/guardian

Date

Membership Privilege

The Sherman Lake YMCA reserves the right to deny membership to anyone for any lawful reason.

Please Initial_____

Have you or any family members that will be using the Sherman Lake YMCA been convicted of a felony?_____ If yes, please explain._____

I swear/affirm that I am not a registered sex offender in any jurisdiction as well any other potential YMCA members in my household. I understand that the YMCA will check the names of all member 18 years and up against public sex offender databases and that any falsification of this registration form or of the names used will result in termination of membership.

Please Initial_____

Membership cancellation due to non-payment

Member fees must be paid in advance for facility use and programs. If there is any lapse in scheduled payments, the Sherman Lake YMCA Outdoor Center may withhold services until the unpaid balances have been received. Please refer any discrepancies to the business office immediately.

Please initial_____

Cancellation Policy by Member

Cancellation of your membership must be done in **person or in writing fifteen (15) days** prior to your membership renewal date. There is a Membership Cancellation Form we request you complete. All outstanding fees will be considered due and payable at time of cancellation. **Please Initial**_____

Renewal of Membership

You are welcome to renew your membership at any time, but **any interruption in membership will be subject to an additional Joiner's Fee**. The Joiner's Fee is currently equal to three month's membership, but is subject to change without notice. Any outstanding fees will be due and payable prior to renewal.

I have read and understand the above stated information and will abide by the spirit of its intent.

Signature of Primary Adult Member

Date

Authorization Agreement for Automatic Payments (EFT)

Sherman Lake YMCA Outdoor Center
6225 N. 39th Street
Augusta, MI 49012

Identification Number 38-3167869

Member Name _____

Member ID# _____

Option #1: I (we) hereby authorize **Sherman Lake YMCA Outdoor Center** to initiate debit entries to my (our) Checking Savings account indicated below at the financial institution named below, and to debit the same such account monthly on the 15th of each month.

Financial Institution Name _____

Routing Number _____ Account Number _____

Option #2: I (we) hereby authorize **Sherman Lake YMCA Outdoor Center** to initiate a charge to my (our) VISA or Mastercard debit/credit card indicated below, and to charge the same such card monthly on the 15th of each month.

Card Number _____ Exp. Date _____

This authorization is to remain in full force and effect until Sherman Lake YMCA has received written notification from me of its termination in such time and in such manner as to afford both parties reasonable opportunity to act on it.

Name _____
(Please Print)

Signed _____ Date _____

Please attach a voided check or savings deposit ticket from which the account the debit is to originate. This is to ensure the YMCA obtains accurate routing and account numbers from your financial institution.

Note: Notify the business office in writing two weeks prior to any change requested including bank, account or termination of transaction to insure membership status.

Sherman Lake YMCA Recreation Center Member Code of Conduct

The 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 outlines prohibited actions. The prohibited actions listed below are not totally inclusive of all behaviors that are inappropriate but include:**

- Inappropriate attire. Appropriate attire must be worn at all times. Modesty is encouraged and appreciated in the locker rooms whenever children are present. Sherman Lake YMCA provides youth camping programs throughout the year. Many youth share the locker rooms with members.
- Unaccompanied children 13 and younger. Individuals 13 years and younger must have an individual 18 years or older with them in the building.
- Unaccompanied children under the age of 8 years in the pool. Children 8 and younger must be accompanied by an adult in proper swim attire in the pool.
- 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.
- Cell phone and mobile electronic device use is prohibited in the locker rooms.
- 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.

Please review and follow these guidelines when visiting Sherman Lake YMCA.

In addition, The YMCA reserves the right to deny access or membership to any person for lawful reasons including anyone who has been accused or convicted of any crime involving sexual abuse; is a registered sex offender; habitually or excessively uses narcotics or dangerous drugs; has ever been convicted of any offense relating to the use, sale, possession, or transportation of narcotics or habit forming and/or dangerous drugs; or continuously or excessively use intoxicating beverages.

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. If a member or guest feels uncomfortable in confronting 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 CEO will investigate all reported incidents. Suspension or termination of YMCA membership privileges may result from a determination by the CEO if in his/her discretion a violation of the YMCA Member Code of Conduct has occurred. I have read and understand the Sherman Lake YMCA Member Code of Conduct.

Please Initial _____

Since we receive grant funding to support our programs, we have been requested to track the following demographics. This information is used for grant reporting purposes only:

Ethnicity:

African-American Asian-American Caucasian
 Hispanic Multi-Racial Native-American Other _____
(please specify)

Number of People in household: _____

School District of Residence: _____

Household Income:

Below \$12,500 \$12,501 – \$20,000 \$20,001-\$35,000
 \$35,001 – \$50,000 \$50,001-\$75,000 Above \$75,000

BE A PART OF SO MUCH MORE!

Annual Campaign - Membership Assistance Fund

Area households, independent youth, and adults in need receive financial assistance through funds raised in the Annual Campaign. Assistance is provided in partial or full scholarship based on household income. **Please consider contributing to help local families, youth, and adults live a better life in mind, spirit, and body.**

Contributions can be made on a monthly or one time basis using EFT, credit card, checks, or cash.

If you have questions about the Annual Campaign or receiving assistance, please see the Membership Manager or check the box below and you will be contacted.

I am interested in learning more about your Annual Campaign/Membership Assistance Fund.