



WEST JAY COMMUNITY CENTER

125 Hoover Street Phone/Fax: 765-768-1544
 P.O. Box 101 Email: wjcc@frontier.com
 Dunkirk, IN 47336 Website: www.thewjcc.org

(Persons over age 60 will receive a 10% discount)

FITNESS MEMBERSHIP REGISTRATION FORM

CIRCLE ONE:

WALKING \$95

FAMILY WALKING \$150

INDIVIDUAL FITNESS \$150

FAMILY FITNESS MEMBERSHIP \$199

*** \$10 DEPOSIT FEE FOR ACCESS KEY***

Membership from: _____ to _____ Card #: _____

All memberships include walking in the gymnasium, fitness memberships also include use of the gymnasium floor for basketball or other approved use when the facility is not being used for games or for private events. Children under 16 years of age cannot be in the facility without supervision of an adult. Sharing of keys is prohibited (No guests) and may cause the forfeit of membership for the year. Loss of access key will result in a \$10 charge for replacement. Only soft sole indoors shoes on the gym walking area at anytime. Lockers are available in gym on a first-come first-serve basis. Membership holders will provide their own lock. Memberships are limited to the uses specified. Individuals not complying can have their membership cancelled for the year without a refund.

Waiver and Release of Liability:

In consideration of West Jay Community Recreation Center furnishing services and/or equipment to enable me to participate in games, I agree as follows. I/We, the parent(s) of, or the player named below, on my/our own behalf and on behalf of my/our child, fully understand and acknowledge that;

- (a) risks and dangers exist in my use of equipment and my participation in activities;
- (b) participation in such activities and/or use of such equipment may result in illness including but not limited to bodily injury, disease strains, fractures, partial and/or total paralysis, eye injury, blindness, heat stroke, heart attack, death or other ailments that could cause serious disability;
- (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of West Jay Community Recreation Center, the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and
- (d) by participation in these activities and /or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, employees of West Jay Community Recreation Center, or by any other person.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify and it's owners, agents, officers and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of the use of equipment or by participation by myself or my/our child in physical activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers or employees of West Jay Community Recreation Center.

I have read the above waiver and release and understand by signing below agree it is my intention to exempt and relieve West Jay Community Recreation Center from liability for personal injury, property damage, or wrongful death caused by negligence or any other cause.

Name: _____ Birth Date: _____ Age: _____

Address: _____ City/State: _____ Zip: _____

Phone Number: _____ E-Mail address: _____

Spouse's Name: _____ Birth Date: _____ Age: _____

Dependent/Children's Names: _____ DOB: _____ M/F: _____ Grade: _____

Dependent/Children's Names: _____ DOB: _____ M/F: _____ Grade: _____

Dependent/Children's Names: _____ DOB: _____ M/F: _____ Grade: _____

Dependent/Children's Names: _____ DOB: _____ M/F: _____ Grade: _____

Member Signature/or Signature of Parent or Guardian if under 18: _____