



YMCA OF CENTRE COUNTY INFORMATION FORM

- NON-MEMBER PROGRAM PARTICIPANT
- GUEST - VISITING WITH (MEMBER'S NAME): _____
- NATIONWIDE MEMBERSHIP
- DAY PASS - PLEASE CIRCLE ONE:
 \$5 YOUTH \$10 ADULT \$15 FAMILY

Staff Filling Out Form:

Cleared Through Raptor:

Program Participant/Guest Information (please print legibly)

| | | | | | | | | | |
|---|--|---------------|------|---|------------|-----------|-----|--|--|
| First Name | | | | MI | | Last Name | | | |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | | Date of Birth | | Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated | | | | | |
| Race <input type="checkbox"/> African American <input type="checkbox"/> Alaskan Native <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Other <input type="checkbox"/> Unspecified | | | | | | | | | |
| Street Address | | | City | | State | | Zip | | |
| Mailing Address | | | City | | State | | Zip | | |
| Home Phone | | | | | Cell Phone | | | | |
| Email Address | | | | | | | | | |

| Emergency Contact | | | | | |
|-------------------|--|-----------|--|--------------|--|
| First Name | | Last Name | | Phone Number | |

Medical – Please list any medical problems that we should be aware of in case of an emergency:

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, individuals are asked to act appropriately at all times when in our facility or participating in our programs. We expect persons using the YMCA to act maturely, behave responsibly, and respect the rights and dignity of others. Our Member's Code of Conduct outlines prohibited behavior, but the actions listed below are not an all-inclusive list considered inappropriate in our facilities or programs:

- Using or possessing alcohol or illegal chemicals on YMCA property
- Smoking in the YMCA facility
- Carrying or concealing a weapon or any device or object that may be used as a weapon
- Use of cell phones in the YMCA's shower and locker room areas
- Use of any video/picture taking equipment, including camera phones, in YMCA's shower rooms, locker rooms, and fitness center area
- 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
- Inappropriate, immodest, or sexually revealing attire
- Theft or behavior that results in the destruction or loss of property
- Loitering within or on the grounds of the YMCA

I have read and understand the YMCA Code of Conduct:

Program Participant/Guest or Parent/Legal Guardian Signature

Date

ID Number

Last Name

First Name

MI

Member Type

Expiration Date

MEMBERSHIP AGREEMENT

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. In addition, the YMCA reserves the right to deny access or membership to any person who has been accused or convicted of any crime involving sexual abuse, 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 is presently or habitually under the influence of dangerous drugs or chemicals, narcotics, or intoxicating beverages.

Members and guests are encouraged to take responsibility for their personal comfort and safety by asking any person whose behavior threatens their comfort to refrain from such behavior. Anyone who feels uncomfortable in confronting a person directly should report the behavior to a staff member 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.

- 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’s Code of Conduct has occurred.
- Membership cards remain the property of the YMCA and must be surrendered upon demand of the YMCA.
- All fees paid for membership including Joining Fees are non-refundable.
- The YMCA also has my permission to photograph or tape myself, spouse and child(ren) while participating in YMCA activities and use them for marketing purposes.

RELEASE & WAIVER OF LIABILITY

THIS IS A RELEASE AND WAIVER OF LIABILITY (“RELEASE”) RELATING TO ACTIVITIES OFFERED BY THE YMCA OF CENTRE COUNTY (“YMCA”). PLEASE READ IT CAREFULLY. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE YMCA EXECUTIVE STAFF. BY SIGNING THIS RELEASE, IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN ACTIVITIES OFFERED BY THE YMCA, I UNDERSTAND, ACKNOWLEDGE, APPRECIATE AND AGREE TO THE FOLLOWING:

1. YMCA activities can be strenuous and dangerous. There is always a risk of injury from any physical activities, which can be significant and include the potential for serious personal injury or death. While rules, equipment, personal discipline and supervision are intended to reduce this risk, this risk nonetheless exists.
2. I, for myself and/or my child(ren), knowingly and freely assume, all risks, both known and unknown, even if arising from the negligence of the YMCA and any of its officers, directors, members, employees, volunteers, agents, representatives, contractors, affiliates, successors and assigns, or the other participants in the activities (individually, a “Releasee” and collectively, the “Releasees”), and assume all responsibility for damages or injuries to person (including death or disability) or property, arising out of my participation or my child(ren)’s participation in YMCA activities. I take full responsibility for my welfare and safety and my child(ren)’s welfare and safety in the course of participation in YMCA activities. I hereby give permission for the YMCA staff to administer emergency medical treatment as deemed appropriate. Further, I agree that I have consulted with a physician, or have been advised that I should consult a physician, before enrolling myself or my child(ren) in YMCA activities.
3. I, for myself and/or my child(ren), and our respective heirs, personal representatives, and assigns, do hereby:
 - a. release the Releasees from, and agree not to sue the Releasees for, liability for damages or injuries to person (including death or disability) or property, to the fullest extent permitted by law, regardless of whether arising from the negligence of any Releasees, which may arise from or relate to my and/or my child(ren)’s participation or involvement in YMCA activities, and/or from the administration of first aid, treatment or assistance provided by the YMCA or any Releasee.
 - b. agree to indemnify and hold the Releasees harmless from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorneys’ fees, with respect to any and all damages or injuries to person (including death or disability) or property, to the fullest extent permitted by law, regardless of whether arising from the negligence of any Releasees, which may arise from my and/or my child(ren)’s participation or involvement in YMCA activities, and/or from the administration of first aid, treatment or assistance provided by the YMCA or any Releasee.
 - c. consent to be photographed by the YMCA, and to allow the YMCA’s use of photographs of myself and/or my child(ren), at its discretion.
4. This Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Pennsylvania. If any portion of this Release is held invalid, the balance of the Release shall nonetheless continue in full legal force and effect.

HAVING READ, UNDERSTOOD, AND AGREED WITH ITS TERMS, I, HAVE EXECUTED THIS RELEASE ON THE DATE SET FORTH BELOW, TO BE EFFECTIVE IMMEDIATELY.

Program Participant/Guest or Parent/Legal Guardian Signature

Date

Nationwide Membership Waiver

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men’s Christian Associations of the United States of American, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

I have read, understand, and accept the terms of the Nationwide Membership Waiver

Program Participant/Guest or Parent/Legal Guardian Signature

Date

