

## KV YMCA Membership Application

the		Today's Date	Membership Type	Search Daxko	Check NSOR	ID Checked	Home	Branch	
	Inca						AUG	MAN	
Unit #					Та	g #			
Primary I	Member Name:_		D.0	.B	Gend	ler: M	F		
Driver's License #Issuing State:									
Are there any other names (Including maiden) that you have been known by?									
Contact	Info:								
Address_									
			State						
			E-Mail_						
_	cy Contact:								
Relations	ship to primary	member:							
Spouse/S	Significant Othe	r:							
Name			DOB	Tag #		Gender	: M	F	
Driver's	License #				Issuing State	e			
Depende	nts:								
Name			DOB	Tag #		Gender	: M	F	
Name			DOB	Tag #		Gender	: M	F	
Name			DOB	Tag #		Gender	: M	F	
Name			DOB	Tag #		Gender	: M	F	
Billing In	fo: Please initial	box I un	derstand that there is	s a 3 month draf	t minimum and	la 15 day can	cellatior	ı policy.	
I	а	uthorize my	bank to make payı	ment by the m	nethod indica	ated below a	and pos	st it	
to my KV	YMCA account.								
1. A	mount of payme	ent: \$							
2. M	onthly /Draft da	ate: 1st 1	5th Quar	terly	Semi Ann	ual	Annua	I	
3. V	isa Ma	stercard	Discover	Am. Exp	Savi	ngs	Checki	ng	
Routing	#		Account/Card #	¥		Exp. D	ate		
You the buyer may cancel this agreement by written notification 15 days prior to draft date. The KV YMCA reserves the right to adjust membership fees with 30 days written notice.									
Donation: I would like to add a monthly donation to the KV YMCA Strong Kids Campaign   One-time \$\$1\$5\$10\$20Other Amount \$									
Account Holder Signature:					Date:				
	Signature:				Date:				

## Kennebec Valley YMCA Liability Release Waiver

In consideration of receiving permission from the Kennebec Valley YMCA, its affiliates and assigns, hereinafter "KVYMCA," to enter upon the lands and premises of KVYMCA, hereinafter "Premises," the receipt of such permission being hereby acknowledged, and in further consideration of receiving permission to participate and receiving the benefits of participation in any activities, program, special event or activity held on the Premises, the receipt of such permission and benefit being hereby acknowledged, I hereby release, hold harmless and indemnify, KVYMCA, its agents, officers, directors, owners, servants, volunteers and employees of and from any and all liability, claims, demands, actions, and causes of action, whatsoever arising out of or related to any loss, damage, or injury, including death, that I may sustain or to any property of mine while in or upon the Premises, or any premises leased to, owned by, sanctioned by or under the control or supervision of KVYMCA or enroute to or from the Premises leased to or under the control or supervision of KVYMCA in connection with or related in any way to said activity, program, special event, or other activity. \_\_\_\_\_\_\_\_ Being duly aware of the risks and hazards inherent upon entering upon said Premises and /or in participating in any activity, program, special event, or other activity held at said Premises, I hereby elect to voluntarily enter upon said Premises, knowing the present condition of the Premises and knowing that said condition may change and become more hazardous and dangerous during the

## time I am upon the Premises.

I further understand that it is my responsibility to make sure that all equipment that I utilize has been properly inspected by me for obvious signs of damage and is safe and appropriate to use and hereby indemnify KVYMCA from any claim resulting in my injury or injury to others from my equipment. I hereby voluntarily assume and accept all risks of loss, property damage or personal injury, including death from any risks or negligence of any kind, that I may encounter while on the Premises and that may be sustained by myself or to any property of mine while in, on or about the Premises, whether or not connected with or related in any way to said activity, program, special event or other activity including any alleged negligence in the operation, maintenance or design of the premises on the part of KVYMCA or any of its directors, officers, owners, agents, or employees. I also agree to indemnify and hold harmless KVYMCA for any claim for any loss, damage, and injury including death that may be sustained by me or to any property of mine under said circumstances.

I further agree that any claim which I may at any time bring for any reason against KVYMCA, or any of its agents, officers, directors, owners, servants, and employees or any disputes arising out of the use of KVYMCA facilities, shall be submitted to the jurisdiction of the state or federal court in the state of Maine and that no claim or action shall be brought in any other jurisdiction.

This release shall be binding upon myself, and my heirs, next of kin, guardians, trustees, executors, and administrators. The undersigned further authorizes and gives consent to be transported to medical help by ambulance and or treated by a physician or any other medical personnel if medical assistance and or treatment if needed. I agree to accept full costs for all treatment associated with injury. I also agree, that in the event that anyone makes any claim against KVYMCA as a result of any of my activities on their premises or the use of their facilities, that I will indemnify and hold harmless KVYMCA from such claims including any and all court costs and attorney fees. \_\_\_\_\_

I grant permission to KVYMCA to use my photo and video on its website and in publications, and I acknowledge KVYMCA's right to crop or treat the photo and video at its discretion. I also understand that once my image is posted on KVYMCA's website, the image can be downloaded by any computer user. Therefore I agree to indemnify and hold harmless KVYMCA from claim therefrom. \_\_\_\_\_\_ I have carefully read this agreement and the release of liability and fully understand its contents. I am aware that this is a release of liability including negligence and a contract between myself and KVYMCA. I sign it voluntarily with full knowledge of its significance. Therefore I agree to indemnify and hold harmless from claim KVYMCA, its owners and employees. In signing the foregoing agreement, I hereby acknowledge, represent and warrant: A) That I have read the foregoing release, I understand it and sign it voluntarily. B) That I am 18 years of age or older and am of sound mind, or if less than 18 years of age, I have discussed this matter fully with my parent(s) or legal guardian. \_\_\_\_\_

## To Help Us Provide A Safe and Welcoming Environment, Please Answer the Following Questions

Have you or anyone listed on this application ever been convicted of a sexual offense?	Y	Ν
Have you or anyone listed on this registration ever been convicted of a crime other than a traffic violation?	Y	Ν

If yes, Please describe the type of crime and date of conviction. You may be contacted by a YMCA representative before your registration is process. \_\_\_\_\_

I have read and agree to the Membership Policies stated at <u>www.kvymca.orq</u> or given to me by a staff member upon request.

I have read and understand all of the above and fully agree with all of its terms. I hereby sign that all the information provided by myself is accurate and true in its entirety.

Member's Signature	Date
Signature of Guardian (if under 18 years of age)	Date