



Harrison Family YMCA Guest Application

Guest ID #

GUEST OF (MEMBER'S NAME)

MEMBER UNIT #

MEMBER DOB

GUEST FIRST NAME

M.I.

LAST NAME

M F

EMAIL

HOME ADDRESS

CITY

STATE

ZIP

DATE OF BIRTH

AGE

TELEPHONE

DRIVER'S LICENSE # & STATE

EMERGENCY CONTACT

EMERGENCY CONTACT PHONE

IF UNDER 18, PARENT NAME

DOB

PHONE #

Adult guests can only sign in two additional guests:

Adult Guest
 Youth Guest
 Raptor Scanned
 Photo Taken
 Expiration Alert
 Total Amount Paid
 \$ _____

2 ND GUEST - FULL NAME	BIRTH DATE	AGE	<input type="checkbox"/> M <input type="checkbox"/> F
3 RD GUEST - FULL NAME	BIRTH DATE	AGE	<input type="checkbox"/> M <input type="checkbox"/> F

Conditions of Guest Use of the YMCA

Guest Health: Guest represents they are in physically sound condition and understands that participation in cardio exercise, weight training, recreational sports, and the use of pools, spas, saunas, steam rooms, and fitness equipment carry a potential risk of injury or illness. The guest understands the Harrison Family YMCA ("the Y") assumes no responsibility for any such injury or illness.

Guest Conduct and Use of Facility: Guest agrees to abide by all policies and practices of the Y, and understands failure to act in accordance with these rules may result in expulsion from the Y and revocation of the guest pass with no refund. Shower guests have access to the facility during specific times and are limited to one (1) hour use from time of check-in.

Criminal History: Applicant acknowledges it is the Y's policy to deny access to any individual registered as a sex offender.

Property Loss: Guest understands the Y is not responsible for personal property lost, damaged, or stolen while using YMCA facilities – including parking lots – or participating in YMCA programs.

Photograph Permission: Guest hereby grants permission for the Y to use, without limitation or obligation, photographs or other media which may include the guest's image or voice to promote or interpret YMCA programs.

Insurance: Guest understands the Y does not provide any accident or health insurance for its guests, members, or participants, and further understands it is the guest's responsibility to provide such coverage.

Guest Pass Expiration: Guest Pass applications expire after 12 months. Guests must apply for new Guest Pass after expiration.

Guest Agreement/Waiver of Liability

I understand that the mission of The Harrison Family YMCA is to put Christian principles into practice to improve the quality of life in our communities with programs and services that strengthen the spirit, mind, and body for all. Any behavior contrary to the mission of the YMCA will not be tolerated and could result in being asked to leave without refund. By signing below, I accept the mission of the Harrison Family YMCA and agree to conduct myself appropriately at all times while in the YMCA and/or while participating in any YMCA program. THE UNDERSIGNED HAS ALSO READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made. IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation. IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA. THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to negligence of releasee or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA. THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of North Carolina and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Signature

Date

Secured By

***application good for 1 year from the date of signature**

Parent Signature of guest is under 18

Date

***application good for 1 year from the date of signature**