

Acct. # \_\_\_\_\_

# The Greater Morristown YMCA Membership Application

Please complete entire application and *please print*

Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(First) (Last)

Mailing Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Sex: Male  Female

City/State \_\_\_\_\_ Zip Code \_\_\_\_\_ e-mail: \_\_\_\_\_

Home # ( ) \_\_\_\_\_ Cell # ( ) \_\_\_\_\_ Employer \_\_\_\_\_

**SPOUSE**

(2) \_\_\_\_\_ Male  Female  Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**ADDITIONAL MEMBERS**

(3) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Relationship \_\_\_\_\_ Male  Female

(4) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Relationship \_\_\_\_\_ Male  Female

(5) \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Relationship \_\_\_\_\_ Male  Female

The Y reserves the right to suspend membership privileges (without refund) of:

- members who aid the unauthorized entrance of a non-member,
- members who become physically or verbally abusive to other members or staff,
- members who disregard posted rules and regulations,
- members allowing another person to use membership card,
- violation of code of conduct.

Children who have not yet attained the age of 12 and are not participating in a scheduled class **MUST** have parental supervision in the building.

The YMCA reserves the right to close a certain area of the building in order to upgrade and maintain our facilities and equipment to better serve the needs of all our members. Classes may be cancelled due to these closings. These classes cannot be made up. No refunds or credits will be issued for these closures for membership or programs.

The American Medical Association recommends that a person taking part in any strenuous activities, consult their physician prior to participation. I understand that I am participating in Y activities at my own risk and will not hold the YMCA liable. I assume all risks of negligence on the part of the YMCA including, but not limited to, injury from malfunctioning equipment.

**MEMBERSHIPS ARE NOT TRANSFERABLE OR REFUNDABLE.**

I understand that pictures taken at the YMCA and at all programs may be used for promotional purposes in the future. I have read the rules and regulations above and agree to abide by them.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Parent/Guardian if under 18 years)

**Yes! I would like to donate to the Strong Kids Campaign. Add \$ \_\_\_\_\_ one time donation.**

**Office Use Only**

Processed by: (print) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Complete and legible

Fees: Joiners \$ \_\_\_\_\_ Membership \$ \_\_\_\_\_ Donation \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

Cash  Check # \_\_\_\_\_  Charge # \_\_\_\_\_

New Member  Amnesty  Annual Acct # \_\_\_\_\_

Returning Member  Open House  MPP Code #: \_\_\_\_\_

Transferring Member  Summer  3 months Type \_\_\_\_\_

Special New Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Comments \_\_\_\_\_

Membership (circle)	Limited	Youth (thru 11)	Teen (12-18)	Young Adult (19-23)	Adult (24-64)	Family	Senior (65+)	Senior H/W (65+ both)
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