



# MEMBERSHIP FEES

Effective January 1, 2010 (subject to change)

## FULL MEMBERSHIP



Atrium Family YMCA

**FAMILY/HOUSEHOLD**

\$71/month plus tax  
One-time joining fee of \$125/plus tax



East Butler County YMCA

**INDIVIDUAL**

\$47/month plus tax  
One-time joining fee of \$75/plus tax

**SINGLE PARENT FAMILY**

\$56/month plus tax  
One-time joining fee of \$75/plus tax



Fairfield Family YMCA

**FAMILY/HOUSEHOLD PLUS**

\$92/month plus tax  
One-time joining fee of \$125/plus tax

### MEMBERSHIP DESCRIPTIONS

**Family/Household**—Two adults living in the same household including their dependent children (up to age of 18 or full-time student up to the age of 23. Proof of common permanent address is required at sign up.)

**Individual**—Available for all persons 10 and up.

**Individual Plus Dependents**—Available for individuals and their children (up to age of 18 or full-time student up to the age of 23).

**Family/Household Plus**—Three or more adults living in the same household including their dependent children. (Up to the age of 18 or full time student up to the age of 23. Proof of common permanent address is required at time of sign up.)

**NOTE:** You may cancel your YMCA membership at any time, a thirty day notice is required for cancellation. If the membership is not renewed within sixty (60) days of the cancellation, any future membership will be considered “new” and therefore subject to a joining fee. (Note: this does not apply to Corporate Memberships).



Fitton Family YMCA



Hamilton Central YMCA



Middletown Area Family YMCA





# MEMBERSHIP FEES

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## PROGRAM MEMBERSHIP (Basic)

A Program (basic) membership is required to participate in programs/classes.

Includes use of locker room

**DOES NOT INCLUDE FULL FACILITY ACCESS**



Atrium Family YMCA



East Butler County YMCA



Fairfield Family YMCA



Fitton Family YMCA



Hamilton Central YMCA



Middletown Area Family YMCA

<b>INDIVIDUAL</b>	\$15/year plus tax
<b>FAMILY/HOUSEHOLD</b>	\$25/year plus tax
<b>FAMILY/HOUSEHOLD PLUS</b>	\$35/year plus tax

NOTE: Classes have additional fee.



For Office Use Only:

Date: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ ID No: \_\_\_\_\_



# Application for YMCA Membership

### Primary Branch:

- Atrium Family YMCA
- East Butler County Family YMCA
- Fairfield Family YMCA
- Fitton Family YMCA
- Hamilton Central YMCA
- Middletown Area Family YMCA

DATE OF APPLICATION: \_\_\_\_\_

- New Membership
- Rejoin

(01) Primary Member Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_  M  F DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_ Apt: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

#	Dependents / Other First & Last Name	M / F	DOB	Employer/School	Relationship
02			/ /		
03			/ /		
04			/ /		
05			/ /		
06			/ /		
07			/ /		
08			/ /		

### FULL MEMBERSHIP TYPE:

Available at all branches

- Individual
- Family/Household
- Family/Household Plus
- Single Parent Family

Men's Health Center available only at Hamilton Central & Middletown only

- Individual Health Center
- Family/Household Health Center
- Family/Household Plus Health Center

Payment Type:  Monthly Bank Draft  Credit Card Draft  Annual Pay  Payroll Deduction

### PROGRAM MEMBERSHIP (Do not use if you are applying for Full Membership)

Membership Type:  Individual  Family/Household  Family/Household Plus

### To help us serve you better, please fill out the following information.

How did you hear about the Y?  Newspaper  Radio/TV  YMCA Brochure  
 Member (Name \_\_\_\_\_)  Other: \_\_\_\_\_

### Please help us to obtain grants by providing us with your Ethnicity and Household Income Levels.

Ethnicity:  Asian  African-American  Caucasian  Hispanic/Latino  Two or More Races  Other: \_\_\_\_\_

Income Level of Household:  Under \$25,000  \$25,000-\$75,000  \$75,000-\$100,000  \$100,000-UP

*The YMCA is a volunteer-driven organization. We utilize volunteers in programs like Youth Sports, Child Care, Fundraising, Special Events and many other areas. We can certainly use your help!*

Would you like a staff member to contact you regarding volunteer opportunities at this time?  Yes  No

If yes, what area inside the Y would you like to volunteer? \_\_\_\_\_

**The YMCA is a family oriented organization and is committed to providing an atmosphere that is free of offensive and unlawful conduct.**

**Registered sex offenders will be denied or expelled from YMCA membership.**

PLEASE TURN TO REVERSE SIDE FOR RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

**GREAT MIAMI VALLEY YMCA**

**RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT**

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 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.

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS 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 releases 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 releasee or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY 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 Ohio and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representation, statements or inducement apart from the foregoing written agreement have been made.

**NON-REFUNDABLE / NON-TRANSFERABLE MEMBERSHIP**

I understand that memberships are not refundable or transferable.

**STANDARDS AND POLICIES**

I agree to live up to the standards and policies as outlined in the Great Miami Valley YMCA Handbook.

**PHOTOGRAPHY AND VIDEO RELEASE**

I grant my permission to allow pictures and/or videos to be taken of myself and/or my children to be used for the sole purpose of literature, advertisements and events for the Great Miami Valley YMCA.

**I HAVE READ AND AGREE TO THE ABOVE**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Co (adult) Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Co (adult) Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co (adult) Applicant Signature

\_\_\_\_\_  
Date



**THE MISSION OF THE GREAT MIAMI VALLEY YMCA**  
**is to put Christian Principles into practice**  
**through programs that**  
**build healthy SPIRIT, MIND and BODY for all.**