



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# SILVER&FIT® APPLICATION

Butler YMCA 339 N Washington St. Butler, PA 16001  
P 724 287 4733 F 724 287 1007 [www.bcfymca.org](http://www.bcfymca.org)

Rose E. Schneider Family YMCA 2001 Ehrman Rd. Cranberry Twp, PA 16066  
P 724 452 9122 F 724 452 8561 [www.bcfymca.org](http://www.bcfymca.org)

The YMCA is committed to serving people of all ages, races, and economic levels. By answering all questions, you will help us meet this goal. The information is confidential and will not be used for any other purposes. **PLEASE PRINT LEGIBLY.**

**MEMBERSHIP TYPE:**  Silver&Fit®  Silver&Fit® Health Center  
**METHOD OF PAYMENT:**  Annual  Monthly (automatic checking, savings, or credit card drafts)

**PRIMARY MEMBER'S INFORMATION** (Complete for all membership types)

<b>First Name:</b>		<b>MI:</b>	<b>Last Name:</b>	
<b>Date of Birth:</b> /     /		<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Marital Status:</b> <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	
<b>Race:</b> <input type="checkbox"/> American Indian <input type="checkbox"/> Alaskan Native <input type="checkbox"/> African American <input type="checkbox"/> Asian/ Pacific Islander <input type="checkbox"/> Caucasian/White <input type="checkbox"/> Hispanic <input type="checkbox"/> Other				
<b>Mailing Address:</b>				
<b>City:</b>			<b>State:</b>	<b>Zip:</b>
<b>Home Phone:</b> (     )     -		<b>E-Mail:</b> _____		
<b>Cell Phone:</b> (     )     -		<b>I wish to be notified through email about events and news at my YMCA:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Work Phone:</b> (     )     -		<b>Employer:</b>		
<b>Emergency Contact Information:</b>				
<b>First Name:</b>	<b>Last Name:</b>	<b>Relationship:</b>	<b>Phone number:</b> (     )     -	

**Health Plan/Insurance Company Name** \_\_\_\_\_

**Member ID#** \_\_\_\_\_

TYPE:  
UNIT NUMBER:  
FIRST NAME:  
LAST NAME:

**AUTHORIZATION TO THE YMCA: YMCA Monthly Automatic Withdrawal is a continuous membership payment plan. I understand this membership will remain in effect and will continue to be drafted until I give a 7-day written notification of termination to the YMCA.** I have given my authority to the below named bank/credit card company to honor preauthorized EFT/Charge drawn by the YMCA on my account for the membership payments as indicated below. I understand that my YMCA Monthly Automatic withdrawal will begin on \_\_\_\_\_ in the amount of \_\_\_\_\_ and will continue as such until 7 days after my written request for termination of the membership. 1<sup>st</sup> month \_\_\_\_\_ 2<sup>nd</sup> month \_\_\_\_\_ 3<sup>rd</sup> month \_\_\_\_\_ 4<sup>th</sup> month \_\_\_\_\_. When the bank honors the draft by charging my account, such draft shall constitute my receipt for the payment. Should any preauthorized draft not be honored by said bank when received by them, then it is understood that the payment will be collected electronically as well as a **\$10.00 NSF service fee.** Failure to give 7 days written termination notice will result in that month's fees being non-refundable.  VISA  MasterCard  American Express  Discover  Diner Club  Checking  Savings

Initial

**MEMBERSHIP AGREEMENT:**

- o Suspension or termination of YMCA membership privileges may result from a determination by the Executive Director if in his/her discretion a violation of the YMCA Member's Code of Conduct has occurred.
- o Membership cards remain the property of the YMCA and must be surrendered upon demand of the YMCA.
- o Any membership that lapses for 30 days or more will again be assessed the Development Fee.
- o **All fees paid for membership including Development Fees are non-refundable.**
- o Membership is non-transferable.
- o The YMCA may photograph or videotape you, your spouse and/or your child(ren) while participating in YMCA activities. These photos/videos maybe used on our promotional tools and social media outlets.
- o The YMCA reserves the right to request identification (ie. Driver's license, passport, marriage certificate, etc.).

**MEMBER'S ONGOING RIGHT TO CANCELLATION:** After the first thirty days of membership, you may cancel the remainder of your membership at any time by giving the YMCA written notice seven (7) days in advance of your next scheduled day of monthly EFT/Charge. **Any membership that lapsed for 30 days or more will again be assessed the Development Fee. If the draft is not terminated at the requested termination date, it is my responsibility to notify the YMCA as soon as possible. I understand the YMCA will not be liable for drafts that occur after the termination date unless reported within 60 days of the requested date.**

**WAIVER:** I agree that the YMCA shall not be responsible for any personal injuries or losses sustained by me while on any YMCA premises, or as a result of any YMCA sponsored activities. I further agree to indemnify and save harmless the YMCA from any claims or demands arising out of any such injuries or losses.

**MEMBER 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, 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, to behave responsibly, and to 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 of behaviors considered inappropriate in our facilities or programs:

- o Using or possessing alcohol or illegal chemicals on YMCA property
- o Smoking on the YMCA premises
- o Carrying or concealing a weapon or any device or object that may be used as a weapon
- o Use of cell phones in the YMCA's shower and locker room areas
- o Use of any video/picture taking equipment, including camera phones, in YMCA's shower rooms, locker rooms, and fitness center area
- o Harassment or intimidation by words, gestures, body language, or any type of menacing behavior
- o Physical contact with another person in an angry, aggressive or threatening way
- o Verbally abusive behavior, including angry or vulgar language, swearing, name-calling, or shouting
- o Sexually explicit conversation or behavior: any sexual contact with another person
- o Inappropriate, immodest, or sexually revealing attire
- o Theft or behavior that results in the destruction or loss of property
- o Loitering within or on the grounds of the YMCA
- o No pets are permitted on the YMCA premises.

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, is or has been a registered sex offender, 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. **I acknowledge the waiver and membership agreement set forth above and being in sympathy with the Mission Statement of the Butler County Family YMCA, and hereby apply for membership. (Parent or guardian must also sign if applicant is under 18 years of age).**

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**This Section is for YMCA Use Only**

FEE	AMOUNT	PAYMENT	COMMENTS
Prorate	\$	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Swipe <input type="checkbox"/> Account	
Development Fee	\$	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Swipe <input type="checkbox"/> Account	

ACTION	DATE	PROCESSED BY	COMMENTS
Application taken:			
Guest passes given:			
Membership entered:			
Membership checked:			