



# CENTRAL CT COAST YMCA MEMBERSHIP APPLICATION

Serving 25 towns in Bridgeport, Greater New Haven  
and lower Naugatuck Valley

Membership Type: Youth High School Adult College Single Parent Family Family Senior  Senior Family

**Primary Member (must be an adult)**

First Name		MI	Last Name		Date
Gender	Date of Birth	Marital Status		Race (optional)	
Mailing Address					
City		State	Zip	Home Phone	E-mail
Employer		Occupation		Company Address	
City		State	Zip	Company Phone	E-mail
Emergency Contact				Phone Number	

**2nd Adult (if applicable)**

First Name		MI	Last Name		Date
Gender	Date of Birth	Marital Status		Race (optional)	
Employer		Occupation		Company Address	
City		State	Zip	Company Phone	E-mail

**Additional Household Members**

First Name	MI	Last Name	Date of Birth	Gender	Adult or Youth

How did you hear about the YMCA?  Radio/TV  Billboard  Drive by/live in area   
 YMCA  Direct Mail  Newspaper/Magazine  Email  Internet  Former Member  Friend/Family

Did you receive a tour of the facility?  Yes, date of tour? \_\_\_\_\_  No

**For Office Use Only**

Member ID	Membership Type	<b>Payment Method</b> <input type="checkbox"/> EFT <input type="checkbox"/> Credit Card <input type="checkbox"/> Annual	<b>MFA</b> Yes (attach form) Income bracket: _____  No	<b>Monthly Dues</b> Date of EFT/CC Payment <small>(circle one)</small> 1    15
Branch	YMCA Staff Member			Monthly Amount \$ _____

Attach Voided Check Here

**Code of Conduct for Members**

The Central Connecticut Coast 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 Y to act maturely, to behave responsibly, and to respect the rights and dignity of others.

The Y reserves the right to deny access or membership to any person who has been convicted of any crime involving sexual abuse, is or has been a registered sex offender, or is presently or habitually under the influence of dangerous drugs or chemicals, narcotics, or intoxicating beverages. The Y will screen all members and guests against sex offender registries upon joining and periodically throughout the term of their membership.

The Branch Executive will investigate all reported incidents. Suspension or termination of Y membership privileges may result from a determination by the Branch Executive if in their discretion a violation of the Y Member's Code of Conduct has occurred. Suspension and termination are in effect for all branches of the Central Connecticut Coast YMCA unless specified.

Initial: \_\_\_\_\_ I have read and received the code of conduct

**MEMBER/CHILDREN RELEASE and WAIVER of LIABILITY & INDEMNITY AGREEMENT**

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) 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 Y, the undersigned, for himself or herself and such participating children 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 Y 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 by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE Y 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 Y, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the Y and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all 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 or such children whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the Y.
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 or such children in, upon or about the Y premises or in any way observing or using any facilities or equipment of the Y or participating in any program affiliated with the Y 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 to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises of the Y and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the Y.

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 Connecticut 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 representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE Date: \_\_\_\_\_ Signature of Applicant/Parent: \_\_\_\_\_  
Signature of other Adult: \_\_\_\_\_ Name of Child in Program: \_\_\_\_\_  
Name of Child in Program: \_\_\_\_\_ Name of Child in Program: \_\_\_\_\_ Name of Child in Program: \_\_\_\_\_

**Membership Agreement**

If my membership dues are paid through Credit Card or EFT, I understand this is a continuous membership plan. This membership will remain in effect for as long as I retain the membership card issued to me. Membership cards are the property of the Y and must be surrendered upon termination.

All membership rates are subject to change with 30 days written notice. I understand it is my responsibility to notify the Y of any change in address, bank account information if utilizing bank draft for payment of dues or credit card information/expiration date if utilizing credit card for payment of dues.

I understand that the Joiner's Fee is a one-time fee as long as I remain an active member of the Central Connecticut Coast YMCA. If I choose to cancel or discontinue my membership for more than 30 days, a Joiner's Fee will be charged when I reapply for membership.

I understand that I must notify the Y in writing to terminate my membership and the termination will be processed and my Y membership cancelled within 48 business hours of receipt. I acknowledge the Code of Conduct and have signed the waiver and membership agreement; and being in sympathy with the Mission Statement of the Central Connecticut Coast YMCA, I hereby apply for membership.

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

**ELECTRONIC FUNDS (EFT) OR CREDIT CARD AUTHORIZATION**

I authorize my bank or credit card institution to honor preauthorized Electronic Funds Transfer drawn by the Central Connecticut Coast YMCA on my account for membership/program/contribution payments as indicated below. When the bank or credit card honors the EFT by charging my account, such transfer shall constitute notice of payment due and my receipt for the payment. If your checks/EFT draft(s) are returned unpaid they may be collected electronically through ECashFlow. You will be assessed a minimum fee of \$20 (or the maximum amount allowed by law) from ECashFlow for each successful collection of a returned item. I understand that I am also responsible for all other collection costs that may be imposed by my bank.

**I choose to utilize the EFT option for monthly payment directly from my: \_\_\_\_\_ checking \_\_\_\_\_ savings account**

Bank Name \_\_\_\_\_ Name on Account \_\_\_\_\_ Routing/Transit Number \_\_\_\_\_  
Account Number \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Date: \_\_\_\_\_

**I choose to utilize the Credit Card Payment option for an automatic direct monthly payment:**

Credit Card \_\_\_\_\_ Visa \_\_\_\_\_ MC \_\_\_\_\_ Card holder Name \_\_\_\_\_  
Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Billing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date: \_\_\_\_\_

\*I understand that when drafting my membership by checking, savings, Visa, or MasterCard there will be a fee charged by the Y if the institution rejects the payment.