



MEMBERSHIP APPLICATION

OFFICE USE ONLY

Disc:	Amt Paid:	Date:	Initials:
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Note:

MEMBERSHIP RATES

Category	Bank Draft	Annual	Initiation	Patron*
Family	<input type="checkbox"/> \$79	<input type="checkbox"/> \$948	<input type="checkbox"/> \$50	<input type="checkbox"/>
One Parent Family	<input type="checkbox"/> \$68	<input type="checkbox"/> \$816	<input type="checkbox"/> \$50	<input type="checkbox"/>
Two Adult	<input type="checkbox"/> \$69	<input type="checkbox"/> \$828	<input type="checkbox"/> \$50	<input type="checkbox"/>
Individual Adult (18+)	<input type="checkbox"/> \$49	<input type="checkbox"/> \$588	<input type="checkbox"/> \$50	<input type="checkbox"/>
Senior Two Adult (68+)	<input type="checkbox"/> \$65	<input type="checkbox"/> \$780	<input type="checkbox"/> \$50	<input type="checkbox"/>
Senior Individual Adult	<input type="checkbox"/> \$46	<input type="checkbox"/> \$552	<input type="checkbox"/> \$50	<input type="checkbox"/>

Category	Bank Draft	Annual	Initiation
Full-Time Student	<input type="checkbox"/> \$28	<input type="checkbox"/> \$336	\$50
Cultural	<input type="checkbox"/> \$22	<input type="checkbox"/> \$264	N/A
30 Day Temporary Individual Adult		<input type="checkbox"/> \$59 per Month	
Additional Adult (Family, Two Adult)		<input type="checkbox"/> \$20 per Month	
<input type="checkbox"/> Silver & Fit		<input type="checkbox"/> Silver Sneakers	

* Patron Membership – See reverse for description and benefits

CORPORATE RATES and STRONGER TOGETHER (T2) RATES *Signed addendum required

Corporation Name/Employer:

Category	Bank Draft	Annual
Family	<input type="checkbox"/> \$67	<input type="checkbox"/> \$804
One Parent Family	<input type="checkbox"/> \$58	<input type="checkbox"/> \$696
Two Adult	<input type="checkbox"/> \$59	<input type="checkbox"/> \$708
Individual Adult (18+)	<input type="checkbox"/> \$42	<input type="checkbox"/> \$504

Category	Bank Draft	Annual
Senior Two Adult (68+)	<input type="checkbox"/> \$55	<input type="checkbox"/> \$660
Senior Individual Adult	<input type="checkbox"/> \$39	<input type="checkbox"/> \$468
Full-Time Student (employed by corporation)	<input type="checkbox"/> \$288	

PRIMARY ADULT MEMBER INFORMATION

First Name:		MI:	Last Name:	
Street Address:			P.O. Box / Apt No.:	
City:		State:	Zip Code:	
Home Phone:		Email Address:		
Birth Date (M/D/YYYY):		Gender: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Unspecified		
Emergency Contact First and Last Name:			Emergency Phone:	
Religion: <input type="checkbox"/> Jewish <input type="checkbox"/> Other		Cell Phone:		Text? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer/School:			Position:	

MEMBER ENGAGEMENT

Are you (or anyone on your membership) interested in our FREE onboarding program with a trainer in the fitness center? Yes No

What programs are you most interested in? Personal Training Youth Fitness Small Group Training Nutrition
 Swim Lessons Cultural Volunteering Other:

How did you hear about the JCC? Billboard Coupon Clipper Driveby Family/Friend Former Member Mailing
 Newspaper Place of Employment Through a Program Website/Google Other:

CONTRIBUTE

CONTRIBUTE: The JCC is a non-profit organization that welcomes everyone regardless of their circumstances or ability to pay. Unfortunately, membership fees do not cover the costs for the wide range of programming we offer and community support is greatly appreciated. If you would like to make an additional donation to support these efforts, please indicate the amount here:

\$

THANK YOU!

***PATRON MEMBERSHIP / CONTRIBUTION:** The additional money above the cost of the membership category selected is processed separate of the membership cost (within 1-2 days) and recognized as a donation. Patron members get their own locker, have their name listed in program guides and publications, and receive unlimited guest passes.

\$125/Month
\$1500/Annual

ADULT MEMBER #2 INFORMATION

First Name:	MI:	Last Name:
Home Phone:	Email Address:	
Birth Date (M/D/YYYY):	Gender: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Unspecified	
Emergency Contact First and Last Name:		Emergency Phone:
Religion: <input type="checkbox"/> Jewish <input type="checkbox"/> Other	Cell Phone:	Text? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer/School:		Position:

YOUTH MEMBER INFORMATION

First Name	MI	Last Name	Gender	Date of Birth	Grade
			<input type="checkbox"/> M <input type="checkbox"/> F		
			<input type="checkbox"/> M <input type="checkbox"/> F		
			<input type="checkbox"/> M <input type="checkbox"/> F		
			<input type="checkbox"/> M <input type="checkbox"/> F		
			<input type="checkbox"/> M <input type="checkbox"/> F		

PLEASE READ AND SIGN

TERMS & CONDITIONS: Membership is for a minimum of twelve (12) consecutive months. After the twelve-month period, you may terminate your membership by giving written notice to the JCC at least 30 days prior to the effective termination date.

All members agree to abide by the rules and regulations of the JCC and are required to present a valid membership card for identification when using JCC facilities and programs. Membership dues, privileges and cards are non-refundable and non-transferable, remain the property of the JCC and must be returned upon request. In addition, memberships may be cancelled or suspended in cases of conduct which is determined to be contrary to the interest and purposes of the JCC.

Members acknowledge receipt of the JCC's privacy policy as outlined in the member handbook. In accordance with this policy, information about personal health and wellness may be shared internally to enhance member experience. Members understand that it is strongly recommended that they have a physical examination by their physician before beginning any physical fitness program.

Members grant permission to the York Jewish Community Center to use, without limitation or obligations, photographs, film footage, or tape recordings which may include member's image or voice for purposes of promoting or interpreting JCC programs.

WAIVER: Members agree that participation in all programs and services is purely voluntary and shall be undertaken at member's sole risk, and the JCC, its servants, agents or employees shall not be liable for, and are hereby released from, any claim, demands, actions, or causes of action whatsoever for injuries, illnesses or damages to member's person or property arising out of or in connection with the use of the services and facilities of the JCC or the premises where the same are located.

I have read and understood the conditions of membership set out in this MEMBERSHIP APPLICATION and I agree, on behalf of myself, and all listed herein, to be bound by these terms and conditions.

Member's Printed Name:	Signature:	Date:
Parent/Guardian's Printed Name:	Signature:	Date: