



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# Campanelli YMCA COLLEGE STUDENT SUMMER 3 MONTH MEMBERSHIP

**\*\*MUST PROVIDE A VALID STUDENT ID\*\***

First & Last Name: \_\_\_\_\_ Gender: M / F DOB: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

## PAYMENT

**College Student Summer 3 Month Membership: \$75**

\_\_\_\_\_ **Cash**

\_\_\_\_\_ **Credit Card (circle):** VISA MC DISC AMEX

**Please Note:** The credit card will be charged a **ONE TIME \$75 FEE** for a **College Student Summer 3 Month Membership**. Auto cancellation. No joiner's fee. No Hassles.

## WAIVER & RELEASE OF ALL CLAIMS

1. I understand that my participation in YMCA activities regardless of location is at my own risk. As such, I assume full responsibility for bodily injury, death, or property damage arising out of my participation in YMCA activities.
2. I understand that my child/children's participation in YMCA activities, regardless of location is at my own risk. As such, I as the parent or legal guardian assume full responsibility for bodily injury, death, or property damage arising out of my child/children's participation in YMCA activities.
3. I do hereby for myself, my heirs, executors, and administrators, waive release and forever discharge any and all rights and claims for damages which I may have or which may hereafter accrue to me arising out of or connected with my participation in YMCA activities.
4. I understand that, on occasion, photos may be taken for YMCA promotions/publicity as such, I give my permission for the use of my/my family's likeness in such promotion.

*\*\*\*Paragraphs 1, 3, and 4 apply to all adults 18 years of age and older. Numbers 2 and 4 only apply to parents signing for their minor child.*

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