

The Landing

55+ SOCIAL Membership Application

The Landing 55+ Social Membership provides access only to the main level and The Landing programs.

Please complete one application per 55+ Social Member (Age 55+)

Name _____
First Middle Initial Last

Email Address _____

Address _____
Street City State Zip

Phone _____
Home/Cell Work Emergency Contact/Phone

Date of Birth ____ / ____ / ____ Gender M F Race _____

Employer _____

My signature below verifies that the above information is correct and that I have read all policies and procedures on the reverse of this application.

SIGNATURE _____ DATE _____

* OVER *

BEHAVIOR

Social Membership at The Landing at the Woodson YMCA is a privilege. The Woodson YMCA, to the extent not otherwise prohibited by applicable law, reserves the right to deny, condition, or revoke membership of any individual who: (i) is arrested for, charged with, or convicted of sex offenses as that term is defined in Wis. Stat. §301.45(1d)(b); (ii) is arrested for, charged with, or convicted of other crimes inconsistent with the values of the YMCA, including crimes involving moral turpitude or bodily harm; or (iii) engages in inappropriate behavior, or other misconduct on or near the property of the YMCA, including, but not limited to, profanity, abusive language, inappropriate attire, smoking, consumption of alcohol, or removal or damage of YMCA property.

The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

POLICIES

I understand that if I wish to cancel, I will provide a 30-day notice by either completing a cancellation form or by mailing in a cancellation letter. Cancellations via phone are not accepted.

I understand that my photo may be taken and used in marketing materials. If I do not wish to have my photo included, I will notify the photographer.

I agree to indemnify, defend and hold harmless the Woodson YMCA from and against any and all loss, liability, or expense on account of or related to any actions or inactions of the YMCA or arising from the use of the YMCA.

FOR STAFF USE ONLY – PAYMENT PLAN

Staff Initials _____

- Auto Deduction (EFT/Credit Card: Attach voided check/savings slip & auto deduction form)
- Annual Pay (Cash, Check, Credit Card)
- Semi-Annual Pay (Cash, Check, Credit Card)
- Short Term (30 day)

Monthly/Annual/Semi-Annual \$ _____

Total _____

Notes _____