Nishna Valley Family YMCA Membership Application



FOR YOUTH DEVELOPMENT TO FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Name:	(Last)	(First)	***************************************		
	(LdSt)	(FIISC)			
Birth Date:			Sex:	F	М
Home Phone:		Cell Phone:	leaves of the shoot section of the s		And Annual Annua
Email:					
ome Address:		City/State	e/Zip:	Marie	
pouse Name:		Sp	Spouse Birth Date:		
pouse Phone	Number:				
Child(ren)					
Name:		F (Circle One			(Month/ Date/ Year)
Name:		F (Circle One			(Month/ Date/ Year)
Name:		F (Circle One	M e)	Birth Date: _	(Month/ Date/ Year)
Name:		F (Circle One			(Month/ Date/ Year)
Name:		F (Circle One		Birth Date: _	(Month/ Date/ Year)
Name:		F (Circle One	M e)	Birth Date: _	(Month/ Date/ Year)
Emergency	Contact: (Name)	(Phr	one Num	her)	
Membersł	nip Type:	`	me Null	ibei j	
Applicants Si	anature:			Date:	

^{**}Memberships are nonrefundable for any reason and can be revoked without refund if the Board of Directors feels applicants behavior is not consistent with the YMCA's Mission.**

NISHNA VALLEY FAMILY YMCA RELEASE AND WAIVER OF LIABILITY AND 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 no limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, 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 YMCA 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 YMCA 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 YMCA. 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 COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releases") from all Liability to the undersigned or such children and all his personal representatives, assigns, heirs, and nest 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 releases 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 YMCA.
- 2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned of such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused y negligence of the releases 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 release or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.

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 Iowa 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 of inducement apart from the foregoing written agreement have been made.

	I HAVE READ THIS RELEASE
DATE	Signature of Applicant/Parent
	Please Print Name
	Name of Spouse
	Name of Child in Program
	Name of Child in Program