

Membership Application—Crestwood Recreation & Wellness Center

Office Use Only: _____

Today's Date: _____ / _____ / _____

Member Name: _____

Home Phone: (_____) _____

Address: _____

Emergency Phone: (_____) _____

City: _____ **Zip:** _____

Date of Birth: _____ / _____ / _____

FITNESS CENTER MEMBERSHIPS

Annual Membership Crestwood Resident
 6-Month Membership Non-Resident
 3-Month Special Additional
 1-Month Membership First Time Member
 Corporate Membership Renewal
 Membership Special Other _____

RECREATION MEMBERSHIPS

Annual Membership Crestwood Resident
 6-Month Membership Non-Resident
 3-Month Membership Additional
 1-Month Membership First Time Member
 Rec. Act. Pass (RAP) Renewal
 Daily I.D. Card Other _____

Recreation & Wellness Center—Registration Policies and Procedures

- All persons interested in purchasing a Membership at the Crestwood Recreation & Wellness Center must present:
 1. **One Current form of Picture I.D. (Valid Drivers License or State I.D. Card)**
 2. Current Tax or Utility Bill showing Name and Current Address
- Membership is limited to the person registered. CRWC I.D. is required for admittance. Membership is Non-Refundable and Non-Transferable.
- Fitness Orientation is required prior to use of equipment.
- Fitness Center is available for persons 16 years of age and older. No one under 16 is permitted in the Fitness Center.
- Anyone under the age of 10 yrs. must have a parent or legal guardian with them unless participating in a supervised, scheduled CRWC program.
- Failure to abide with the rules and regulations of the Crestwood Recreation & Wellness Center may result in possible forfeiture of Membership and Member Privileges without a refund.

WARNING OF RISK

Aerobic, aquatic and other fitness exercises including such items as passive/resistive weight training, use of stair climbers, treadmills, and other training devices, despite careful and proper preparation, instruction, medical advice, conditioning, and equipment, pose a substantial risk of injury. You are responsible for determining if you are physically fit for these activities. It is advisable to consult a physician before undertaking a physical exercise, fitness or aquatic program.

WAIVER AND RELEASE OF ALL CLAIMS

Please read this form carefully and be aware in signing up and participating in this program you will be waiving and releasing all claims for injuries you might sustain arising out of this program. As a participant in this program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, (including death), damages or loss which I may sustain as a result of participating in any and all activities connected with or associated with such program. I agree to waive and relinquish all claims I may have as a result of participating in the program against the Crestwood Recreation and Wellness Center and its officers, agents, servants and employees. I do hereby fully release and discharge the Recreation and Wellness Center and its officers, agents, servants and employees from any and all claim from injuries, (including death), damage or loss which may have or which may accrue to me on account of participation in the program. I further agree to indemnify and hold harmless and defend the Recreation and Wellness Center and its officers, agents, servants and employees from any and all claims resulting from injuries, (including death), damages and losses sustained by me arising out of, connected with, or in any way associated with the activities of the program. In any event of emergency, I authorize the Wellness Center officials to secure from any licensed hospital, physicians, and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered. I have read and fully understand the above risk warnings of the program, Wavier and Release of All Claims and Permission to Secure Treatment. If registering on-line or by fax, your facsimile shall substitute for and have the same legal effect as an original signature.

Members Name (PLEASE PRINT) _____ **Members Signature** _____

Signature of Parent or Guardian (if under 18 years old) _____

Master Card Visa American Express Credit Card # APPROVAL #	Clerk Initials	Check Cash Gift Cert.
	Expiration Date	Check #
		TOTAL FEE:

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Office Use Only: _____

Today's Date: _____ / _____ / _____

Member Name: _____

Home Phone: (_____) _____

Address: _____

Emergency Phone: (_____) _____

City: _____ **Zip:** _____

Date of Birth: _____ / _____ / _____

AQUATIC MEMBERSHIPS

Annual Membership Crestwood Resident
 6-Month Membership Non-Resident
 1-Month Membership Additional
 Membership Special First Time Member
 Other _____ Renewal

ALL INCLUSIVE MEMBERSHIPS

Annual Membership Crestwood Resident
 1-Month Membership Non-Resident
 Membership Special Additional
 Other _____ First Time Member
 Other _____ Renewal

Recreation & Wellness Center—Registration Policies and Procedures

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 1. **One Current form of Picture I.D. (Valid Drivers License or State I.D. Card)**
 2. **Current Tax or Utility Bill showing Name and Current Address**
- Membership is limited to the person registered. CRWC I.D. is required for admittance. Membership is Non-Refundable and Non-Transferable.
- No one under the age of 16 years old is permitted in the pool area without an adult unless participating in a supervised program.
- No one under 18 years old is permitted in the whirlpool. No one under the age of 16 years old is permitted in the fitness center.
- No one under the age of 10 years old is permitted in the recreation center without an adult unless participating in a supervised, scheduled CRWC program. Open gym, pool and fitness center rules and regulations are posted for your safety and must be followed at all times.
- Failure to abide with the rules and regulations of the Crestwood Recreation & Wellness Center may result in possible forfeiture of Membership and Member Privileges without a refund.

WARNING OF RISK

Aerobic, aquatic and other fitness exercises including such items as passive/resistive weight training, use of stair climbers, treadmills, and other training devices, despite careful and proper preparation, instruction, medical advice, conditioning, and equipment, pose a substantial risk of injury. You are responsible for determining if you are physically fit for these activities. It is advisable to consult a physician before undertaking a physical exercise, fitness, recreation or aquatic program.

WAIVER AND RELEASE OF ALL CLAIMS

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Members Name (PLEASE PRINT) _____ **Members Signature** _____

Signature of Parent or Guardian (if under 18 years old) _____

1 Master Card Visa American Express Credit Card # APPROVAL #	Clerk Initials	Check Cash Gift Cert. Check #
	Expiration Date	TOTAL FEE: