



# YMCA OF MEMPHIS & THE MID-SOUTH MEMBERSHIP APPLICATION

PLEASE PRINT

BILLABLE MEMBER

Name: \_\_\_\_\_ Sex: ☐ M ☐ F Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
First M Last

Casual Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Marital Status: ☐ Single ☐ Married Ethnicity: ☐ African-American ☐ Caucasian ☐ Multiracial ☐ Other  
☐ Asian ☐ Hispanic ☐ Native American

☐ By providing your email address to the YMCA, you will have access to YMCA online services and will receive YMCA e-newsletters.

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

Medical Alert Information: \_\_\_\_\_

ADDITIONAL MEMBERS

## SPOUSE INFORMATION\*

Name: \_\_\_\_\_ Sex: ☐ M ☐ F Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
First M Last

Casual Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Ethnicity: ☐ African-American ☐ Caucasian ☐ Multiracial ☐ Other  
☐ Asian ☐ Hispanic ☐ Native American

## IRS DEPENDENTS\*

Family Member Names	Relation	Sex	Birthdate	Ethnicity

\* It is the policy of the YMCA of Memphis & the Mid-South that all family members listed on a YMCA family membership must be IRS dependents of the billable member listed above. Proof may be required.

### HOW DID YOU HEAR ABOUT THE YMCA?

- ☐ TV  
☐ Radio  
☐ Newspaper or Magazine  
☐ Mailing/Postcard  
☐ Online  
☐ YMCA Website  
☐ Employer  
☐ Member Referral  
☐ Drive By  
☐ Doctor  
☐ I was a previous member  
☐ Other \_\_\_\_\_

### JOINING FEE

- ☐ Pay in full today  
☐ Pay a minimum of one-third today and the balance will be added to your first two drafts.  
☐ Senior Discount  
☐ Corporate Discount

### OPTIONAL FEES (At Select Branches)

- Locker # \_\_\_\_\_ ☐ Bankdraft  
Size \_\_\_\_\_ ☐ Annual  
☐ 6 Month

### OFFICE USE ONLY

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Branch \_\_\_\_\_

#### Open Doors Income Level

- ☐ <\$20,000 ☐ \$40,000-\$49,999  
☐ \$20,000-\$29,999 ☐ \$50,000-\$59,999  
☐ \$30,000-\$39,999 ☐ ≥\$60,000

Staff \_\_\_\_\_

Mbr Type \_\_\_\_\_ Mbr # \_\_\_\_\_

Next Bill Date: \_\_\_\_\_ Corporate: \_\_\_\_\_

☐ Epay ☐ 6 month ☐ Annual ☐ Monthly

Receipt # \_\_\_\_\_ Amount Paid \_\_\_\_\_

Para obtener esta información en español, por favor pídala al personal de recepción.

## AUTHORITY TO DRAW ACH DEBITS OR DRAFTS FOR MEMBERSHIP PAYMENTS

☐ Savings ☐ Checking ☐ Credit/Debit

Name on Bank/Credit Card Account

Billing Address (On Account)

PLEASE NOTE: 30 days advance notice from draft date in person or by a registered letter for cancellation.

Joining Fee Draft	1st mth ____ 2nd mth ____ N/A ____
Membership	\$
Optional Fee 1	\$
Optional Fee 2	\$
Total Monthly Draft	\$

BANK DRAFT

Depositor's Account Number \_\_\_\_\_

Bank Route & Transit Number \_\_\_\_\_

CREDIT CARD

CC ending in \_\_\_\_ / \_\_\_\_ Exp \_\_\_\_ / \_\_\_\_

☐ V ☐ MC ☐ AMEX ☐ Disc

I have given authority to my financial institution to honor preauthorized checks/drafts drawn by the YMCA on the above account for membership payments. I understand that the sending of a preauthorized check/draft to my financial institution as a payment becomes due shall constitute valid notice of such payment due on this membership. When the financial institution honors the check/draft by charging my account, such check/draft shall constitute my receipt for the payment. Should any preauthorized check/draft not be honored by said financial institution, then it is understood that the payment is to be made by me in the amount of said payment plus a service charge. Membership fees subject to change with a 30 day written notice to member.

Signature of Bank Depositor/Account Holder: \_\_\_\_\_

## WAIVER

The YMCA of Memphis & the Mid-South will not assume responsibility for any injury incurred while participating in any athletic event, sports program, or any physically related activity. Certain risks are inherent during participation in these events.

The YMCA of Memphis & the Mid-South will not be liable for lost or stolen items while members and/or program participants are using YMCA facilities or are not on the YMCA premises. I, the undersigned for myself, my heirs and assigns, do hereby release the YMCA of Memphis & the Mid-South and its branches, employees and agents from any and all claims for injury, death, loss or damage I may suffer as a result of my participation.

I assume full responsibility for removing myself from any media opportunities that I do not wish to participate in. I hereby grant to YMCA the unrestricted right to use and publish photographic images of me, or in which I may be included, for marketing materials, YMCA websites or YMCA social networks, editorial trade advertising, and any other lawful purpose related to the YMCA.

I understand and agree that bank/credit card draft and a la carte programs do not have an expiration date. To cancel a program or my membership, I must complete a cancellation form in person or send a registered letter, giving 30 days notice prior to my bank draft and return my permanent membership cards. (Cancellation forms may be obtained at the YMCA branch).

It is the policy of the YMCA of Memphis & the Mid-South that all family members listed on a YMCA family membership must be IRS dependents of the primary member listed on reverse side. Proof may be required.

I understand that joining fees, prepaid semi-annual and annual memberships are non-refundable.

I understand that if I terminate my membership, I have 60 days to rejoin without paying a joining fee, and that all past due balances must be paid before joining or re-joining the YMCA.

SIGNATURE OF PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(if participant is 17 years or younger)

SIGNATURE OF MEMBER(s) \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_