



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

2017-18 PROGRAM PARTICIPANT MEMBERSHIP WYCKOFF FAMILY YMCA

Primary Adult/Member Name: _____
(Ages 18 or older)

For Office Use Only:
DATE: _____

Relationship to Participant(s): _____

REC: _____

D.O.B.: _____ **Gender:** M / F

Street Address: _____ **Home Phone # :** _____

City/St/Zip: _____ **Business Phone:** _____

E-mail Address: _____ **Cell Phone:** _____

Emergency Contact Name and Phone: _____
Other than Primary Adult/Member

All program classes including childcare require a program membership. Please list all required program participant members below.

Participant 1 Name: _____ **D.O.B.:** _____ **Gender:** M / F

Participant 2 Name: _____ **D.O.B.:** _____ **Gender:** M / F

Participant 3 Name: _____ **D.O.B.:** _____ **Gender:** M / F

Participant 4 Name: _____ **D.O.B.:** _____ **Gender:** M / F

Photo Release Waiver:

_____ I consent to allow the Wyckoff Family YMCA to take photographs of my child which may be used as part of activities or promotional materials.

_____ No photographs of my child may be taken.

Annual Membership Fee: \$70 per participant Choose: CASH CHECK or CREDIT CARD

All Membership fees are indicative of your support of this association and its mission, and are therefore non-refundable.

In consideration of my membership (including my family and all guests) to participate in activities at the Wyckoff Family YMCA, I, for myself, my heirs, executors and administrators, hereby release and forever discharge the Wyckoff Family YMCA and all representatives and personnel from all liabilities, actions, claims, demands, damages, costs and expenses, which may now or in the future have against them or any of them arising out of my participation at the above mentioned Wyckoff Family YMCA including, but not limited to, all injuries that may be suffered by me.

Signature of Parent/Guardian: _____ **Date:** _____
(Parent's Signature if under 18)

Help us help you!

Select applicable areas of interest so we may effectively communicate important ongoing updates.

- | | | | |
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| <input type="checkbox"/> GEC (Group Exercise Classes) & Workshops | <input type="checkbox"/> Childcare | <input type="checkbox"/> Y Arts in the Community | <input type="checkbox"/> NYC Trips |
| <input type="checkbox"/> Fitness/Personal Training | CHILDRENS:
<input type="checkbox"/> Aquatics | <input type="checkbox"/> Teen Activities | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Splash Alerts: Pool Schedule Closings | <input type="checkbox"/> Programs | <input type="checkbox"/> Summer Camp Wydaca | <input type="checkbox"/> Volunteering |
| <input type="checkbox"/> Open Gym Schedules | <input type="checkbox"/> Sports | <input type="checkbox"/> Spring Lake | <input type="checkbox"/> Family Events |
| | <input type="checkbox"/> Studio 691 School of Dance | <input type="checkbox"/> AOA (Active Older Adult) | |