

Marietta Family YMCA Participant Application

Expiration Date _____ Join Date _____
Program ID# _____ Type of Program _____

Payment Method (Circle One) Bank Draft Quarterly Annual Semi-Annual

Mr. Mrs. Dr. Ms. Miss _____
(Circle one) First Last MI

Mailing Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Business Phone _____ Spouse’s Phone _____

Email Address _____

Spouse’s Email Address _____

Preferred Method of Contact _____

Male Female Date of Birth _____ Married Single Ethnicity _____
(Circle one) (Circle one)

Place of Employment _____ or Name of School _____

In case of Emergency Notify _____
 (Name) (Phone Number)

Fill out the section below if enrolling as a couple program participant

First Name	MI	Last Name	Sex	Name of Employer or School	DOB

Have you ever been a member of the Marietta Family YMCA? YES NO

How did you hear about us? _____

Did a current YMCA staff or program participant refer you to us? If yes, who?

Would you be willing to volunteer? (i.e. Board or Committee Member, Sports, Program, Clerical, Fundraising) If so, which one? _____

Waiver

In consideration of the Marietta Family YMCA accepting this application, I for myself, my heirs, executors, administrators, and/or for the minor(s) for whom I am signing release and forever discharge the Marietta Family YMCA and its officers, employees, directors, agents, and all persons connected with the YMCA, of any and all rights, claims, demands for all loss, damage, and injuries sustained by me or my property, or by the minor(s) for whom I am signing for his/her property at any time.

I declare, for myself and the minor(s), that I/he/she/we am/are/is physically sound and medically approved to participate in the activities of the Marietta Family YMCA. In signing below, I release the Marietta Family YMCA and its staff from liability. I am aware that all activities carry a certain amount of risk. I am in reasonable health to participate in these activities.

Signature of Applicant/ Parent or Guardian if a minor Date

Marietta Family YMCA Code of Conduct

The Marietta Family YMCA is a cause-driven organization that is for youth development, healthy living and social responsibility. A strong community can only be achieved when we invest in our kids, our health and our neighbors. With this in mind, the Marietta Family YMCA embraces and promotes the values of caring, honesty, respect and responsibility. All individuals using the YMCA facilities are expected to conduct themselves in a manner consistent with these character values. Failure to do so may result in revocation of financial assistance funds and membership privileges.

I understand and support the purpose of the Marietta Family YMCA and I hereby pledge to practice and promote the values of caring, honest, respect, and responsibility.

Signature of Applicant/ Parent or Guardian if a minor Date

Program Fees Refund Policy

All program changes and cancellations MUST be made **30 days before** the expiration date or next bill/ draft date. **Program fees are non-refundable.**

Signature of Applicant/ Parent or Guardian if a minor Date

SEX OFFENDER BACKGROUND CHECKS: All program participants are screened against the Ohio and national sex offender database monthly. The YMCA reserves the right to deny/ terminate access or program participation to any person who has been accused or convicted of any crime involving sexual abuse; is a registered sex offender; or who has demonstrated unlawful conduct that may be conceived as a threat to the well-being of YMCA program participants and guest.

For Office Use Only
Processed By _____ **Date** _____