

YMCA AND JCC OF GREATER TOLEDO MEMBERSHIP APPLICATION

ymcatoledo.org

Center _____ Max Individual Youth Senior Plus 1 Plus 2 Plus 3
 Partner in Healthy Living PHL Co. _____ Small Business Church Insurance
 Silver Sneakers Military Associate Family Individual Youth
 Member ID# _____ - _____ - _____

First _____ MI _____ Last _____ Male Female
 Address _____ Birthdate _____ / _____ / _____
 City _____ ST _____ Zip _____
Phone Home () _____ - _____ Mobile () _____ - _____
 E-mail _____
 Occupation _____ Employer _____ **Work** () _____ - _____
 Spouse Occupation _____ Employer _____ **Work** () _____ - _____
 E-mail _____
 Emergency Contact _____ Relationship _____ **Phone** () _____ - _____

FAMILY MEMBERSHIP INFORMATION (LIST LAST NAME IF DIFFERENT)

Spouse/Dependents	M/F	Birthdate	Relationship	Youth Membership Info Only
02				Mother's Name
03				Employer
04				Phone
05				
06				Father's Name
07				Employer
08				Phone

I heard about the YMCA/JCC through: (check all that apply)

- TV Newspaper Radio Web site Billboard Brochure/Flier Staff/Board Member
 YMCA Member or Friend Facebook

The YMCA/JCC is committed to serving people regardless of their ability to pay. The following information helps us know whether we are reaching all income levels. This information is strictly confidential and will help us to better serve our communities.

Ethnicity

- Asian African American Hispanic Native American Indian Caucasian
 Not listed above, please specify: _____

Annual household income

- Under \$10,000 \$10,000 - \$20,000 \$21,000 - \$30,000 \$31,000 - \$40,000
 \$41,000 - \$50,000 \$51,000 - \$75,000 \$76,000 - \$100,000 Over \$100,000

Would you be willing to volunteer? Yes No

Area of interest _____

In consideration of my participation in the recreational and other activities of the YMCA and JCC of Greater Toledo, I assume all risk of injury that may occur to myself and/or my family, and do hereby agree to hold free from any and all liability, and otherwise indemnify, the YMCA and JCC of Greater Toledo and their respective officers, employees, agents, volunteers and members and do hereby for myself, my heirs, executors and administrators waive, release, and forever discharge any and all rights and claims for injuries and/or damages which I may have or which may hereafter accrue to me arising out of or connected with my participation in any activities of the YMCA and JCC of Greater Toledo.

I hereby declare myself and my family members to be physically sound, capable of, and electing to participate in the recreational and other activities of the YMCA and JCC of Greater Toledo.

 Signature of Applicant

 Date

DATE **TYPE** **RECEIPT NUMBER** **DOWN PAYMENT** **MONTHLY PAYMENT**

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