



Fitness Center Membership Application/Contract

Name: Last		First		MI		Soc. Sec. #	
Birth Date: (mm/dd/yyyy)		Age:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Membership Type: <input type="checkbox"/> Individual (18-64 years of age) <input type="checkbox"/> Senior (65 +) <input type="checkbox"/> Work Comp. <input type="checkbox"/> Single Day Use		
Mailing Address:						Today's Date:	
City:		State:	Zip Code:			Home Phone: ()	
Employer:			Occupation:			Work Phone: ()	
Emergency Contact:			Relationship to member:			Emergency Contact Phone: ()	
Name of Primary Physician:						Physician Phone: ()	
How did you learn about the Fitness Center?							

Section 1. Membership Provisions

The classification of members, fee schedules, membership discipline, and all other questions relating shall be under the management control of Chugach Physical Therapy Fitness Center (CPTFC).

Membership will not be denied on the basis of gender, race, color, creed, religion, or national origin, nor shall any aspect of such matters be made a condition of membership.

Membership is predicated on the member's ability to safely and independently use the exercise equipment. Membership may be revoked at any such time a member demonstrates actions or behavior unsafe to him/herself or other occupants of the facility.

Reinstatement of membership, after a denial, based on an apparent safety or health risk, would require a physical examination by a physician. The physician would have to clear the member for fitness and ability to safely and independently use the facility and equipment, with no apparent risk of injury to self or others.

Minors between the ages of 14 and 18 years are eligible for Fitness Center Membership if accompanied by an adult family member who has a current Fitness Center membership.

Hours of operation are currently Monday-Friday 6:30 a.m. to 6:30 p.m. CPTFC reserves the right to change the hours and days of operation as deemed necessary.

Section 2. House Rules

All members MUST sign in at the Fitness Center counter daily prior to using the facility or any equipment. **Member Initials** _____

Members shall give written notice of address changes. Failing such notice, all communications shall be presumed to have been received within five (5) days of mailing. **Member Initials** _____

MEMBERS ARE RESPONSIBLE FOR MONTHLY DUES WHETHER OR NOT THEY USE THE FACILITIES (See section 3 for putting account on hold). Payments for dues and initiation fees are not subject to refund. **Member Initials** _____

Accounts due will be billed at the beginning of each month. Billing is based on a whole calendar month. Statements are due and payable upon receipt. **A member more than 60 days delinquent may be denied use of the facility and cancellation of membership.** **Member Initials** _____

Discounts may not be combined with any other offers.

Member Initials _____

CPTFC IS A NON-SMOKING FACILITY! Smoking will not be permitted inside the building or outside near the entrances.

Member Initials _____

All members use the CPTFC facilities at their own risk and must hold harmless Chugach Physical Therapy and Chugach Physical Therapy Fitness Center for any injury, damage to or loss of property.

Member Initials _____

Damage to CPTFC property shall be paid for by any member who willfully, neglectfully, or negligently causes such damage. Members are responsible for damage incurred by minors or guests they have sponsored into CPTFC.

Member Initials _____

All members are encouraged to have a physical examination including an exercise stress test to determine present health before commencement of a new exercise program.

Member Initials _____

Section 3. Putting an Account on Hold or Termination of Membership.

Members may put their membership on hold by submitting a **30 day ADVANCE written notice of their request. Membership may be put on hold for whole months only, up to a maximum of six (6) consecutive months.** Members will not be charged for the time their membership is on hold. **Membership will automatically go active at the end of the hold period and members are responsible for monthly dues whether or not they utilize the facility.**

Member Initials _____

Members may terminate their membership by submitting a **30 day ADVANCE written notice of resignation to CPTFC.** A resigning member shall remain liable for all dues and other charges incurred through the effective date of resignation. (For example, a termination notice received on July 1, or later in the month, would require that the member be charged for the month of July.)

Member Initials _____

With termination of membership, payment of the initiation fee is required, if a former member decide to rejoin.

Member Initials _____

Any member may be expelled by CPTFC personnel for violation of any rule, regulation, or through conduct which is prejudicial to the welfare, good order and character of CPTFC.

Section 4. Membership Agreement

In consideration of the terms and conditions set forth, the undersigned Member understands and agrees as follows:

1. I consider myself to have the physical and cognitive ability required to safely and independently use the CPTFC facility and equipment without injury to myself or others.
2. I will be bound by the provisions and rules of CPTFC as outlined.
3. I will pay monthly dues and charges. The monthly dues shall be as indicated by CPTFC and shall be subject to change.

Individual (18-64 years)	\$75.00 Initiation	\$45.00/month
Seniors (65 + years)	\$50.00 Initiation	\$25.00/month
or		
Single Day Use		\$ 5.00/day

**New member initiation fee waived with the purchase of 6 or more months membership
One month free with purchase of a 12 month membership (month 13 waived)**

Member Signature: _____ Date: _____

Staff Member: _____ Date: _____