



YMCA Membership Assistance

New Member Form

Payer Information:

First Name: _____ Last Name: _____
 Address: _____ City: _____ Postal Code: _____
 Home Phone: _____ Cell Phone: _____
 Work Phone: _____ Employer (optional): _____
 Date of Birth: _____ Gender: _____
 Email: _____

(*By providing my email, I consent to receive emails from the YMCA of Saskatoon regarding facility, class, administrative information, and relevant correspondence.)

Emergency Contact:

Name: _____ Phone Number: _____ Relationship: _____

Member Information:

If you are signing up for a family membership or if the membership is not for yourself please fill out this section.

Name:	Gender:	Date of Birth:	Relationship:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Membership Type:

- Child/Youth (17 and under) Adult (27 years +)
 Young Adult (18 – 26 years) Family Advantage

Financial Information:

Please attach one of the following options: your most recent T4, or social assistance stub, or two paystubs.

How much do you feel you can contribute to the bi-weekly membership fees? \$ _____

Any special circumstances that should be taken into consideration:

I hereby apply for financial assistance for YMCA Membership. The information I have submitted is, to the best of my knowledge, correct. I understand that submitting false or inaccurate information or failure to notify the YMCA of any changes to my financial situation may result in my termination from the financial assistance program.

- YES - Book a Personal Trainer for 30 Minute Consultation (\$30 value) NO - I would prefer to not meet with a Personal Trainer

Where did you hear about the YMCA of Saskatoon?

- Current Member Recruited Me Website Social Media Leisure Guide Radio Other: _____

OFFICE USE ONLY

Plan Type

Annual: Expiry _____
 One Month: Expiry _____
 Bi-weekly Preauthorized:
 PAP Credit
 Bi-weekly Rate: _____
 1st Payment Date: _____

ID Verified & Start Date of Membership

ID Verified _____ (Staff initials)
 Contract Start Date: _____

Payment Method

Amount Paid: \$ _____
 Receipt #: _____
 Cash Debit Credit
 Cheque No _____
 Staff Initials: _____ Date: _____
 Admin Verified: _____ Date: _____



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Terms and Conditions of Membership

Please read and initial on each blank, and sign at the bottom.

Initials: _____ All members are required to present a valid membership card for identification when using YMCA facilities and/or participating in programs. If for any reason members are unable to present membership cards, they may be required to present photo identification. Membership cards are not transferable, remain the property of the YMCA, and must be returned to the YMCA upon request.

Initials: _____ Terms and conditions of membership in the YMCA of Saskatoon are defined in the Member Code of Conduct and Facility Guidelines and are subject to change. Bi-weekly memberships continue indefinitely unless members **provide written notice** of cancellation, or the YMCA terminates the membership. If an NSF or Decline occurs on bi-weekly payments, I understand that I am responsible to repay the membership fee. If the credit card I have on file expires or changes I am responsible to provide new payment information. If any of my account information changes I am responsible to update it at the Member Services Desk. . **I understand that the YMCA requires a minimum 2 business day's written notice to cancel or make changes to my membership.** Annual memberships must be renewed.

Initials: _____ I understand that I will be automatically transferred into a new membership category on my birthday if I am eligible, in which membership dues may increase or decrease. In the event of any other qualifying event, for example, corporate or financial assistance rates that changes the level of membership for which I am eligible, I agree to notify the YMCA a minimum of 2 business days prior to next bi-weekly billing cycle.

Initials: _____ **Liability Waiver:** I understand that the YMCA of Saskatoon assumes no responsibility for injuries or illnesses which I, my spouse/partner, or my minor children or any other person may sustain as a result of my/their physical condition, this membership, my/their use of any facility or my/their participation in any activities, programs, exercise, or the use of any equipment (collectively, "Activities"). I expressly acknowledge on behalf of myself, my spouse/partner, my minor children and our heirs that I assume the risk for any and all injuries, illnesses, death, loss or damage which may result from any of the foregoing. I hereby release and discharge the YMCA of Saskatoon, its agents, servants, and employees from any and all claims for injury, illness, death, loss or damage which I, my spouse/partner, or minor children may suffer as a result of my/their physical condition, this membership, the use of any facility or participation in any Activities. In the event I, my spouse/partner or minor children bring any guest to any YMCA of Saskatoon facility or activity, I also agree to be responsible for ensuring that such guests adhere to the rules and policies of the YMCA and to inform them that they assume all liability for injuries, illness, death, loss or damage which may result from participation in any activities, programs, exercise or the use of any equipment.

Initials: _____ I understand that the YMCA of Saskatoon is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities or are on YMCA premises.

Initials: _____ I give my permission to the YMCA of Saskatoon to use indefinitely, without limitation or obligation, photographs, film, footage, or tape recordings which may include my, my spouse's or minor children's image or voice for purposes of promoting or interpreting YMCA programs.

YMCA Strong Kids Campaign

The YMCA is determined that no one should be denied access to the YMCA because of the inability to pay for membership and program fees. Every year, members like you donate to the YMCA Strong Kids Campaign, making us able to provide financial assistance towards membership, camp, and before and after school care by reducing registration fees.



A convenient way to donate is by rounding up your membership fees **bi-weekly by just \$3, \$5, or \$7** to support children and families in need in Saskatoon. A donation of **\$7.00 bi-weekly** will help send a child to camp this summer!

Initials: _____ Yes! I want to help by donating \$ _____ **bi-weekly** through my membership fees.

I acknowledge the Terms, Conditions, and Liability Waiver set forth above and the Member Code of Conduct and Facility Guidelines and, being in agreement with the Mission, Vision, and Values of the YMCA, hereby apply for membership.

Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____