



Fitness. Family. Community.

14 Day FREE Trial Application

Date

First Name

Last Name

Street Address

City

State

Zip

Email

Primary Phone

Employer

Gender

Date Of Birth

Picture

Parent/Guardian (if Member is under 18)

Emergency Contact Name

Relationship To Member

Phone

Additional Family Members (Complete for Trial Family or Couple Membership Only)

Spouse/2nd Adult's Name

Date Of Birth

Gender

Email

Phone

Child's Name

Date Of Birth

Gender

Child's Name

Date Of Birth

Gender

Child's Name

Date Of Birth

Gender

Child's Name

Date Of Birth

Gender

Child's Name

Date Of Birth

Gender

Where did you hear about the WCC?

- Current Member _____
- Employer _____
- Promotion _____
- Friend or Relative
- Mailer
- Newspaper
- Walk-In
- Website
- Other _____

Reason for Trial

- I am a regular exerciser looking for a new facility
- I am a non-exerciser considering starting
- I have exercised previously and considering starting again
- I am interested in the WCC for other reasons

Area(s) of interest

- Aerobics
- Spinning
- Basketball/Gymnasium
- Lap Swim/Open Rec Swim
- Yoga/Pilates
- Racquetball/Tennis
- Fitness Room
- Other _____

Tour of facility completed?

- YES
- NO
- Tour given by _____
- Guest Pass Given

Date of Tour _____ Time of Tour _____

During your 14 Day FREE Trial Membership, you are considered a Member of the Whitin Community Center (WCC). Members are expected to abide by the rules set forth by the WCC, not doing so can be grounds for losing membership privileges. For a full listing of membership rules and regulations, please refer to the Member Handbook.

1. I (we) understand that 14 Day FREE Trial Members do not receive Member pricing on program registration.
2. I (we) understand that 14 Day FREE Trial Memberships are intended for one time, 14 Day Trial use. A minimum of 2 years from the last day of the previous trial must pass before requesting a new trial membership.
3. I (we) understand that a WCC Staff guided facility tour must be completed in full prior to receiving 14 Day FREE Trial Membership.
4. I (we) understand that we must verbally check-in at the Member Services Desk for every visit to the WCC.

_____ Signature	_____ Date
_____ Signature (Spouse or 2nd Adult)	_____ Date

Release & Waiver Of Liability

In consideration for being permitted to utilize the facilities, services, and programs of the WCC for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the WCC without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledge, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the WCC observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE WCC FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE WCC WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the WCC, its directors, officers, employees, and agents (hereinafter referred to as "Releases") from all liability to the undersigned, his or her personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death or the undersigned, whether caused by the negligence of the Releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the WCC without respect to location.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the WCC or in any way observing or using any facilities or equipment of the WCC or participating in any program affiliated with the WCC whether cause by the negligence of the Releases or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR, AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of Releases or otherwise while in, about, or upon the premise of the WCC and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the WCC.
4. The WCC does not condone staff privately providing services, including child care, for members or program participants. Parents understand that the WCC is not responsible for staff who conduct outside employment, and hereby release the WCC from any liability for acts or omissions of any staff who provide services outside of WCC employment.
5. By signing the Agreement, I hereby give my permission for the WCC to take my photograph of me or my child(ren) and use or publish this likeness for WCC purposes, and I release the WCC from any claims for such use. If I wish that me or my child's photo not be taken or use, I must give a written request to the Director of Member Services.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER, INDEMNITY AGREEMENT AND PHOTO RELEASE is intended to be as broad and inclusive as is permitted by the law of the State of Massachusetts and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

_____ Signature	_____ Date
--------------------	---------------