



Application—Greater Peoria Family YMCA

Primary Member Name: _____ Today's Date: _____

Mailing Address: _____ Gender: _____

City: _____ State: _____ Zip: _____ Home/Cell Phone: _____

Birth date: _____ Business Phone: _____ Employer: _____

Race/Ethnicity _____ Primary Member E-mail Address: _____

Emergency Contact Name: _____ Emergency Phone: _____

If Primary Applicant is Under 18 years of age:

Mother's Name: _____ Mother's Phone: _____

Father's Name: _____ Father's Phone: _____

Membership Type: *(please circle options below)* Monthly Membership or Annual Membership

Family Single Parent Family Adult College Youth Young Adult Senior Senior Couple

Other: _____ (ex: Silver Sneaker, Babysitter)

Please complete the portion below for all secondary members on this membership. Please print.

First Name	MI	Last Name	Gender	Employer/School	Date of Birth	Relationship to Primary Member

Office Use Only: All boxes checked and signature on application YES NO

Date Received

Staff Initials

Over

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How did you hear about us (check all that apply)?

TV Friend Billboard Radio Facebook Twitter
 Instagram Website Peoria YMCA Member _____

What programs/activities are you and your family interested in?

Youth Sports Teen Programs Childcare Volunteer
 Group Fitness Boot Camp Personal Sr. Programs
 Aquatics Adult Sports Training Family

What are your recreational hobbies? _____

The Greater Peoria Family YMCA is a non-profit, charitable organization providing youth programs and membership scholarships for those in need. Community programs include:

- East Bluff Basketball League for 100 underprivileged boys each summer, which gives participants a free meal each week and a safe and positive environment for them to thrive in.
- Free Swim Lessons for low-income families
- Almost \$50,000 in scholarships for programs, membership and many other community programs and activities for low-income families

Yes, I would like to donate towards the Y's youth and family programs.

\$1 per month \$5 per month \$10 per month \$_____ per month

CREED: I hereby apply to join the Greater Peoria Family YMCA, I agree to foster the YMCA Character Development Values of CARING, HONESTY, RESPECT AND RESPONSIBILITY and to model them in my behavior and observe the YMCA Code of Conduct while I am at the YMCA or involved in YMCA sponsored activities. Since it is contrary to the mission of the YMCA to be a sex offender, I understand the YMCA will deny membership to a person whose name appears on a list of registered sex offenders.

WAIVER: In consideration of the YMCA accepting the application, I, for myself, my heirs, executors, administrators and/or for the minor(s) for whom I am signing release and forever discharge the Greater Peoria Family YMCA and its officers, employees, directors, agents, servants and all persons connected with the YMCA, of and from any and all rights, claims, demands and actions of any and every nature whatsoever, for any and all loss, damage, injuries sustained by me or my property, or by the minor(s) for whom I am signing or 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 YMCA.

Sexual Offender Background Check Policy - We consider it of great importance to provide a safe and threat-free environment. For this reason the YMCA monitors the sexual offender registry. Persons on the list will not be eligible for YMCA membership, program participation, volunteer or employment opportunities with the Greater Peoria Family YMCA.

I understand that I am to give the YMCA thirty (30) days written notice to terminate my membership and that no refunds will be issued for any portion of my cancelled membership. (Please initial)

I understand that if I cancel my membership and apply again I will have to pay the applicable Joiner's Fee. If I apply within a 12 month period of my cancellation, I will be required to pay for the entire year in full plus the joiner's fee applicable to my membership type OR for a seasonal member if applicable (avail. only May-Sept.) This does not apply to Youth, Young Adult, or College Memberships. (Please initial)

Applicant/Guardian signature: _____ Date: _____