



YMCA of Regina – Membership application - RODS

Please forward to: Harish Malkani

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Main Contact on the Fam	nily Account							
First Name					La	ist Name		
Residence Address								
Street							Birthdate	Gender
							MM/DAY/YY	
City				Postal Code				
Telephone Numbers				l				
Home	Business	Business			Cell			
Email Address								
Family Information – List	of members	r	1				1	
Name (include last name if different)		Gender	Birthda (Month/day		Relationship (please indicate if spouse, biological or foster child)		Membership Category (Family or Individual)	
1.			/	/				
2.			/	/				
3.			/	/				
4.			/	/				
5.			/	/				
6.			/	/				
7.			/	/				
8.			/	/				
Emergency Contact Infor	mation		1					
Name					Relationship		Phone Number:	
RODS Caseworker								
Name					Phone number:			
Email:								





Please read carefully, initial in boxes indicated & sign below

CONDITIONS OF MEMBERSHIP	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.	
Terms and conditions of membership in the YMCA of Regina are defined in the Membership Information Guide and are subject to change. Monthly memberships continue indefinitely unless members provide written notice of cancellation, or the YMCA terminates the membership. Annual memberships must be renewed.	
I understand that I will be automatically transferred into a new membership category on my birthday if I am eligible, in which event dues may increase or decrease. In the event of any other qualifying event that changes the category of membership for which I am eligible, I agree to notify the YMCA on or before the first day of the month following the month in which such event occurs.	
I consent to receiving the YMCA of Regina's newsletter and other commercial messages regarding the YMCA of Regina's products and services. I may withdraw my consent at any time using the contact information provided here. Contact the YMCA of Regina for more details at <u>306-757-9622</u> . (YMCA of Regina, 3801 B Albert Street Regina, SK S4S 3R4).	
The YMCA of Regina reserves the right to close areas of the building in order to upgrade and maintain facilities and equipment to better serve the needs of all our members. No refunds or credits will be issued due to these closures for membership or programs.	
LIABILITY WAIVER	INITIALS
I understand that the YMCA of Regina 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 Regina, 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 Regina 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.	
I understand that the YMCA of Regina is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities or are on YMCA premises.	
I give my permission to the YMCA of Regina 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.	
ACCEPTANCE	
I acknowledge the CONDITIONS OF MEMBERSHIP and LIABILITY WAIVER set forth above and in the Member Information Guide and, being in ag the Mission and Goals of the YMCA, hereby apply for membership.	reement with

SIGNATURE OF CASE WORKER

SIGNATURE OF FAMILY HEAD OF HOUSEHOLD

SIGNATURE OF PARENT OR GUARDIAN (if member under the age of 18)

DATE

DATE