

YWCA IS ON A MISSION

YWCA Annual "Pay-As-You-Go" Plan

One month minimum

Name: _____

Date: _____

Membership Plan (circle): All Access Fitness Center Only Pool Plan
Membership Type (circle): Individual Youth Family Adult/Child Adult/Spouse

My Fitness/Pool plan fees are paid through a monthly credit card draft. I understand this is a continuous membership plan. This membership will remain in effect for as long as I maintain current payment. It is my understanding that if I wish to terminate my continuous membership plan in any way, I must give the YWCA White Plains & Central Westchester 30 days written notice and receive confirmation from the YWCA stating my membership has been terminated.
____ Initials

I understand that there are no refunds given and my membership fee is non-refundable regardless of non-use and agree that any fees that have been accrued and unpaid on my account will be charged to the credit card on file. ____ Initials

I understand if I cancel my membership I will have to re-join and pay the current joiners fee and membership plan rate. ____ Initials

I understand I need a medical note to put my membership on hold for medical leave up to 3 months. ____ Initials

I understand that my monthly credit card draft will be on the 20th day each month. ____ Initials

I understand it is my responsibility to notify the YWCA of any change in address, email and credit card information/expiration dates. If I fail to update information required to maintain my membership, including updating credit card fees, my membership will be revoked and I will incur additional fees to re-enroll. ____ Initials

Hold Harmless: I hereby release and agree to hold harmless the YWCA White Plains & Central Westchester, its affiliates, insurers, attorneys, principals, directors, officers, agents, employees and volunteers (the "Released Parties") from any injury, loss, liability, damage or claims of any kind, including claims resulting from the negligence of any Released Party that may arise out of or relate to my or my child(ren)'s participation in the YWCA to the greatest extent allowed by law. I certify that I have read and agree to this release and I fully understand it and am not relying on statements or representations of any Released Party. _____ Initials

Emergency Consent: I understand that the YWCA assumes no responsibility for injuries or illnesses which I may sustain as a result of my physical condition or resulting from my participation in any activity or use of any equipment or exercise. In the event of emergency, the YWCA has my permission to administer immediate first aid by qualified YWCA personnel to myself. ____ Initials

I understand that the YWCA is not responsible for personal property lost or stolen while on the premises. ____ Initials

I give my permission to the YWCA to use, without limitation or obligation, photographs, film footage or tape recordings which may include my image or voice for promotion and advertisement of YWCA programs. ____ Initials

I acknowledge this Agreement and accept the Membership Policies set forth above and within the YWCA Program Brochure. ____ Initials

PAYGO-121216

YWCA Activity Center
515 North Street, White Plains, NY 10605
P 914.949.6227 F 914.949.2021

YWCA Residence for Women
69 North Broadway, White Plains, NY 10603
P 914.428.1130 F 914.428.1439

eliminating racism
empowering women
ywca

YWCA Annual "Pay-As You-Go" Plan

Credit Card Authorization Form

Name: _____

Date of Birth: _____

Address: _____

Home: _____

City/State: _____

Cell: _____

Email: _____

Emergency Contact

Name: _____

Relationship: _____

Phone: _____

Credit Card Information

Credit Card No: _____

CSV #: _____ Exp. Date: _____

Name on Card: _____

Authorization

Membership Plan (circle): All Access Fitness Center Only Pool Plan
Membership Type (circle): Individual Youth Family Adult/Child Adult/Spouse

"Pay-As You-Go" Down Payment: \$ _____

"Pay-As You-Go" Monthly Fee: _____

Date: _____

Authorization Signature: _____

FRONT DESK ONLY:

Contract Rec'd Date: _____ Processed: _____ Staff: _____