

Williamsburg Community Recreation Center

939 S. Highland Street
Williamsburg, IA 52361

Phone: (319) 668-1636
Fax: (319) 668-8805

All memberships are non refundable and non transferrable



Name

Last _____ First _____

Address

Street _____ PO Box # _____ City _____ State _____ Zip _____

Phone

Home _____ Cell _____ Email _____

Type of Membership: (mark one)

	<u>1 Month</u>	<u>3 Month</u>	<u>Annual</u>	<u>Daily Drop-In</u>	
Full Facility	Adult (19 & Over)	\$30.00	\$53.50	\$192.60	Full Facility \$4.28
	Couple*		\$80.25	\$267.50	Open Gym \$2.14
	Family**		\$107.00	\$374.50	
	Senior (62 & Over)	\$30.00	\$42.80	\$160.50	<u>Punch Card</u>
	Senior Couple		\$64.20	\$214.00	10 Punches for \$37.45
	Youth (9-18)	\$30.00	\$42.80	\$160.50	
Walking Only	<u>3 Month</u>			<u>Daily Drop-In</u>	
	Single (9 & Over)	\$ 48.15		\$ 1.07	
	Senior (62 & Over)	\$ 32.10			

* A couple is defined as two adults related by marriage

** A family is defined as 1) one or two adults related by marriage; and 2) any sibling who is related to one or both adults by blood, marriage, adoption or legal guardianship. An unmarried, dependent, full-time undergraduate student can be included in a family membership through the age of 23. Children must be at least 9 years old be at the Recreation Center without direct adult supervision. Children must be at least 12 years old to have access to the weight room and cardio equipment.

Family Members to be included on Membership:(include yourself)

	<u>Age/Birthdate</u>	<u>Gender</u>	<u>Card #</u>
1. Name: _____	_____	M F	_____
2. Name: _____	_____	M F	_____
3. Name: _____	_____	M F	_____
4. Name: _____	_____	M F	_____
5. Name: _____	_____	M F	_____
6. Name: _____	_____	M F	_____
7. Name: _____	_____	M F	_____
8. Name: _____	_____	M F	_____

Please list family members with medical conditions that we should be aware of:

Emergency Contact Information:

Please list who we should contact in case of any emergency.

Name: _____ Relationship: _____

Phone: _____

Home

Work

Cell

ALL MEMBERS MUST SIGN WAIVER FORM ON FOLLOWING PAGE.

**Williamsburg Community Recreation Center
Acknowledgement of Assumption of Risk and Release Agreement**

THIS FORM MUST BE SIGNED BY ALL MEMBERS WHO ARE 18 YEARS OF AGE OR OLDER.

I request the use of the Williamsburg Community Recreation Center and equipment for my recreation, and for the improvement of my own fitness and athletic skills.

I understand and am aware that strength, flexibility and aerobic exercise, including the use of equipment, is a potentially hazardous activity and such activities are without direct supervision. I recognize that severe injuries can occur in athletic and fitness programs, and I realize those severe injuries can include, but are not limited to, muscle sprains and strains, back injuries, heart attacks, permanent paralysis and even death. I realize it is in my best interest to consult a doctor before engaging in any physical training.

My participation at the Recreation Center is strictly voluntary, and free from any coercion to use the recreation facilities. I am not being paid to use the facilities. My interest is solely my own self improvement through sport, exercise, and other activities available at the Recreation Center.

I further acknowledge that I will observe and follow all rules, regulations and policies of the Recreation Center.

In consideration of the Williamsburg Community Recreation Center allowing me to use their facilities, I hereby forever release the City of Williamsburg and its employees from all liability for any and all damages and injuries, including death, suffered by myself or my family in connection with the use of the Recreation Center. I understand that my participation is entirely by my own choice and with the understanding of the risks of accidental injuries involved in any fitness activity within the Recreation Center. I am using the facility and equipment of my own free will and accept any and all risks associated with this use.

If the member is a minor - I acknowledge my parents or legal guardian know of this request on my part, as well as the injury risks I am assuming.

THIS FORM MUST BE SIGNED BY ALL MEMBERS WHO ARE 18 YEARS OF AGE OR OLDER.

I have read and understand the preceding Acknowledgement and Agreement.

I have read and understand the attached page outlining the rules and regulations of the Rec Center.

Signature Date

Signature Date

Signature Date

Signature Date

For office use:

Payment:

_____ Cash _____ Check # Amount: \$ _____

Date Received: _____ By: _____

Membership From: _____ to _____

Entered into Membership Software: _____ By: _____

Please detach this page and keep for your reference.

Williamsburg Community Recreation Center

General Rules and Regulations

- ⁴ ALL CHILDREN UNDER 9 YEARS OLD MUST HAVE DIRECT ADULT SUPERVISION **AT ALL TIMES**.
- ⁴ THE WEIGHT AND CARDIO ROOM AND EXERCISE EQUIPMENT IS FOR ANYONE 12 YEARS OLD AND OLDER ONLY. MACHINES ARE FOR WORKING OUT ONLY, NOT PLAYING ON. WIPE DOWN MACHINES AFTER USE.
- ⁴ BE RESPECTFUL OF EQUIPMENT, MACHINES AND ALL AREAS OF THE RECREATION CENTER.
- ⁴ NO FOOD OR DRINK IS PERMITTED IN THE GYM AREA. NO COOLERS ARE ALLOWED IN THE FACILITY.
- ⁴ ONLY CLEAN, RUBBER WHITE SOLED SHOES ARE PERMITTED ON THE GYM FLOORS, WALKING TRACK AND RACQUETBALL COURT.
- ⁴ THERE IS ABSOLUTELY NO STOPPING ON THE WALKING TRACK. PLEASE CONTINUE MOVING AT ALL TIMES. DO NOT STOP TO WATCH OTHER ACTIVITIES OR TALK TO SOMEONE.
- ⁴ DAILY-USE LOCKERS ARE PROVIDED IN THE LOCKER ROOMS FOR YOUR CONVENIENCE. LOCKS ARE NOT PROVIDED. WE ARE NOT RESPONSIBLE FOR LOST OR STOLEN ITEMS.
- ⁴ ALL INJURIES MUST BE REPORTED TO THE RECREATION CENTER STAFF IMMEDIATELY.
- ⁴ USE GOOD SPORTSMANSHIP AT ALL TIMES. NO PROFANITY ALLOWED.
- ⁴ HAVE FUN!