



Lodi Sports and Recreation Center Membership Contract Agreement

OFFICE USE ONLY	
Today's Date:	_____
Membership Term:	_____
Payment:	PIF or BANK or CREDIT
Sales Person:	_____

Membership Term: Annual 6 Month 3 Month

Membership Type: Family Older Adult Adult Student/Youth

Last Name First Name M.I. Male/Female

Address Apt. # City State Zip

Date of Birth Home Phone Alternate Phone Email

Person to contact in the event of an emergency Relationship Phone Number

PLEASE COMPLETE INFORMATION BELOW FOR EACH ADDITIONAL INDIVIDUAL: Family members may include two parents and their children 17 and under residing at the same address and/or unmarried children through age 23 who are full-time students. Family relatives (eg. cousins, aunts, grandparents, etc.) cannot be on a family pass.

Name Relationship Date of Birth Male/Female

Name Relationship Date of Birth Male/Female

Name Relationship Date of Birth Male/Female

Name Relationship Date of Birth Male/Female

Name Relationship Date of Birth Male/Female

Club Guidelines:

The following are a few club rules we feel need special attention. Club rules are not limited to these and are subject to change. These rules are enforced for your safety and convenience, as well as the safety and convenience of others. We appreciate your full cooperation.

- Children 13 and under (unless completed the LSRC Junior Certification) are not allowed in the club unattended.
- Children must be 14 years of age (or have completed the LSRC Junior Certification) to use the weight rooms and equipment.
- There are times throughout the year that the club facilities will be reserved for regular club programs and special events. Members will be given advance notice when facilities are not available for open use. Members will not be compensated for these circumstances.

All individuals and family members purchasing a membership are encouraged to consult with a physician before engaging in exercise or other physical activity. Lodi Sports and Recreation Center, Inc. (LSRC) is not responsible for monitoring the health condition or health risks of its members or guests. All members and guests must execute an approved Waiver and Release and Idemnification form before using LSRC equipment and facilities or participating in LSRC programs.

Annual Contract Only: (Please Initial Payment Plan)

_____ I understand that I am committed to a **ONE YEAR** membership with the monthly payments of _____. This contract will continue on a monthly basis after the first year unless the Lodi Sports and Recreation Center receives a written notice by certified mail 30 days prior to cancellation. The monthly dues cannot be raised during the first year of membership and will continue at the stated locked in rate until I initiate cancellation.

_____ I understand that I am committed to a **ONE YEAR** membership with one complete payment of _____.

I realize and accept that this membership is issued at the discretion of the LSRC and may be revoked for a violation of LSRC rules and/or policies, as established and updated from time to time by the LSRC, without return of the membership fees.

Signature

Date

Cancellation Policy:

I understand that I may cancel this contract without penalty or further obligation by a written notice of my cancellation to be delivered in person within three (3) business days of the date of this contract or the date of receipt to the address specified in this contract. A refund will be then given within fifteen (15) days. (DOES NOT APPLY TO RENEWALS)

I understand that my membership agreement cannot be cancelled with exception of: The buyer becomes significantly physically or mentally disabled for a period in excess of three months with reasonable evidence of illness including a doctor's letter.