



<u>Staff Use Only</u>	
Account Number: _____	
Date: _____	Staff Initials: _____

Application for Membership

YMCA OF METROPOLITAN LOS ANGELES

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The YMCA is a membership organization open to all. Everyone is welcome to apply regardless of race, religion, age, gender, sexual orientation, national origin, economic level or disability. If you can't afford the full cost of membership, financial assistance is available to the extent possible. Please ask for a confidential scholarship application. Participants needing other accommodation should contact their local YMCA. To provide an atmosphere that is safe and inclusive to all, the YMCA enforces a Code of Conduct. Membership is provided at the discretion of the Board of Directors and may be revoked.

MEMBERSHIP TYPE

Choose Membership Type: Facility CHOICE Other _____

Choose Membership Category: Youth Adult Family Other _____

PRIMARY MEMBER (Parent or guardian for applicants under 18 years)							Check ID <input type="checkbox"/>	
Legal First Name	M	Legal Last Name	Preferred Name	Date of Birth	Gender	Ethnicity		
Home Address			Apt	City	State	Zip Code		
Marital Status	Home Phone		Cell/Other Phone					
Primary Email			What is the primary language spoken at home?					
Employer Name		Occupation/Position		How did you hear about the YMCA?				

GENERAL INFORMATION

Emergency Contact Name (Outside of household)	Relation to Primary Member	Phone Number
Have you been a YMCA Member before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you interested in Volunteering? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECONDARY ADULT							Check ID <input type="checkbox"/>	
Legal First Name	M	Legal Last Name	Preferred Name	Date of Birth	Gender	Ethnicity		
Marital Status	Cell/Other Phone							
Primary Email			Relation to Primary Member					
Employer Name		Occupation/Position						

ADDITIONAL MEMBERS AND APPLICANTS

Legal First Name	MI	Legal Last Name	Preferred Name	Date of Birth	Gender	Ethnicity



CONDITIONS OF MEMBERSHIP

Member Health: The applicant(s) represents that he/she is in physically sound condition and understands that participation in aerobics and other exercise, weight training, recreational sports, and use of pools, spas, saunas, steam rooms and fitness equipment carry a potential risk of injuries or illness. The applicant further understands that the YMCA of Metropolitan Los Angeles assumes no responsibility for any such injury or illness.

Member conduct and right to use the facility: All applicants and dependents agree to abide by all policies and procedures of the YMCA of Metropolitan Los Angeles and its branches and understand that failure to act in accordance with these rules may result in expulsion from the YMCA and revocation of the membership.

Criminal History: The applicant acknowledges that it is the policy of the YMCA of Metropolitan Los Angeles to deny membership to any individual convicted of a sexual offense and that the YMCA will periodically check its membership records for criminal history.

Property Loss: The applicant understands that the YMCA of Metropolitan Los Angeles is not responsible for personal property lost, damaged or stolen while using YMCA facilities or participating in YMCA programs.

Video Taping & Cell Phone Use: Due to the advances in video equipment and telephone video technology, and for the safety and security of our members and guests, any and all video equipment may not be used in locker rooms, dressing areas, shower areas, restrooms, or other areas generally deemed to be "private" within YMCA facilities. The YMCA of Metropolitan Los Angeles requests that cell phone usage be reserved for lobby or designated cell phone areas only. In the Westside Family YMCA, the "designated areas" in addition to the main lobby are the East Roof and Pool Observation Deck.

PRIVACY/SECURITY STATEMENT

The YMCA is very concerned about the privacy of its members and maintains their personal information in confidence. We collect information from members for the purposes of billing and providing information on upcoming events and program opportunities. Data is used to determine how well your YMCA is serving the community. Your records will not be released to a third party without your permission. You may inspect your records and update your personal information at any time. Please notify the Executive Director of your YMCA about any concerns regarding the privacy of your YMCA records.

MEMBERSHIP AGREEMENT

As a member of the YMCA, I understand and agree to abide by the YMCA's Code of Conduct. I understand that membership is a privilege and may be suspended or revoked for behavior that is not consistent with the YMCA's Code of Conduct. I also understand that policies, procedures, and services are subject to change at any time without prior notice. (_____/_____) Initials)

I assume responsibility for all listed dependents on my membership and agree that they too will abide by the YMCA's Code of Conduct. (_____/_____) Initials)

Other conditions of membership may apply, please see branch membership handbook or visit the Welcome Center for more information.

Signature of Applicant or Guardian

Date

Additional Adult Applicant

Date