



# RECIPROCAL MEMBERSHIP FORM

YMCA of the Greater Tri-Valley

Branch

Oneida Family YMCA  Rome Family YMCA

Member Name		DOB	Gender
Street Address			
City		State	ZIP
Home Phone	Mobile Phone	Email	
YMCA HOME BRANCH		Membership Type	

Dependents	Name	DOB	Gender
	Name	DOB	Gender
	Name	DOB	Gender
	Name	DOB	Gender

Emergency	Contact Name
	Relationship
	Phone

Notes
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Reciprocal Member Agreement	I have received a copy of the Program Guide including the facility policies. I have reviewed it and agree to it. Member Initials: _____
	I agree that the YMCA may photograph or videotape me and/or my family, and the YMCA may use those photographs or video footage for its marketing purposes. I release the YMCA from any claim or liability related to that use, and waive all claims for myself, my heirs and assignees against the individual staff persons and the YMCA of the Greater Tri-Valley. Member Initials: _____
	I understand that Reciprocal benefits include free use of YMCA of the Greater Tri-Valley facilities for up to 5 visits/month, including pools, gymnasiums, wellness centers and drop-in group exercise/aquatics classes. Member Initials: _____
	I understand that as a Reciprocal member of the YMCA of the Greater Tri-Valley, I may use services and registered programs at the non-member rate. Member Initials: _____
	I understand that Reciprocity does not include guest pass privileges, Child Watch or Prime Time or YMCA of the Greater Tri-Valley Member-Only Programs. Member Initials: _____
	The YMCA of the Greater Tri-Valley will re-verify my membership status every 90 days for renewal. Member Initials: _____
I understand that there is a risk of injury associated with participation in any YMCA program or use of its facilities. In consideration for YMCA of the Greater Tri-Valley ("YMCA") membership, participation in its programs and/or use of its facilities, I assume full responsibility for any and all injuries, damages or losses in any way arising from or connected with my participation in YMCA programs or use of its facilities. By doing so, I hereby waive any right to sue the YMCA and release, hold harmless and forever discharge it, its employees and agents, individually or otherwise, from any and all liability, claims, lawsuits, demands, rights or causes of action of any kind, including negligence. I certify that all of the information provided on my application is true.	
I understand that this agreement constitutes a binding promise. I have read it	
Primary Member's Signature	Date