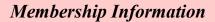
## FITNESS CENTER MEMBERSHIP



Parks & Recreation

Date of Birth://
<del></del>
Phone: (
Relation:
Relation:
Phone:()
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rships
*Annual \$120R/\$180NR *Monthly \$10R/\$15NR
*Annual \$180R/\$270NR *Monthly \$15R/\$22.50NR
*Annual \$75R/\$125NR *Monthly \$6.25R/\$10.50NR
*Annual \$125R/\$188NR *Monthly \$10.50R/\$15.75NR
*Daily \$3R/\$5NR
t member number

ALL FITNESS CENTER MEMBERSHIPS INCLUDE FREE ADMISSION TO ALL OPEN GYM TIMES!!

Family Members		
Name:	Date of Birth:/	
Agreement and Release of Liability		
<ul> <li>and that I/we am/are voluntarily participating in these activities volved. I/We hereby expressly assume any and all risks of injute.</li> <li>I/We hereby do further declare myself/ourselves to be physical infirmity, or other illness that would prevent my/our participat we have been informed of the need for a physician's approval.</li> </ul>	ment in addition to the payment of any fee or charge, I/we Parks & Recreation Department, and its officers, agents, email responsibilities or liabilities from injuries or damages aris-Community Center Fitness Center, participation in all use of kson Joint Parks & Recreation Department representatives. ic exercise, including the use of equipment, are jointly or indidge that fitness activities involve a risk of injury or even death, as and using equipment with knowledge of the dangers intry or death.  Ily sound and suffering from no condition, impairment, disease, ion or use of equipment. I/We do hereby acknowledge that I/for participation in and recommended that I/we have a yearly physician as recommendations concerning these fitness activier had a physical examination and been given a physician's ate in activities and use of equipment with the approval of a tion, activities, and utilization of equipment in my/our activitic beverages is allowed at the Jackson Community Center. I/	
<ul> <li>Jackson Joint Parks &amp; Recreation and the Jackson Community Center will provide a fitness membership card that will need to be swiped for entry into the Fitness Center. I/We acknowledge that supervision is not provided at the facility. I/We acknowledge that use of the membership card by someone else will result in loss of membership.</li> <li>I/We acknowledge that this Agreement and Release of Liability constitutes the full agreement with the Jackson Joint Parks &amp; Recreation Department and the Jackson Community Center. The Jackson Joint Parks &amp; Recreation Department makes no warranties or representations, express or implied, other than those set forth in this Agreement. I/We acknowledge that the sole and exclusive remedy in the event of breach of this Agreement by the Jackson Joint Parks &amp; Recreation Department</li> </ul>		
<ul> <li>shall be cancellation of this Agreement.</li> <li>I/We acknowledge that I/we must comply with all rules and re</li> </ul>	•	
Signature:	Date:/	
Signature:	Date://	

SIGN UP TODAY FOR OUR FREE FITNESS MEMBER ORIENTATIONS WITH OUR CERTIFIED PERSONAL TRAINER!!