



MEMBERSHIP APPLICATION

Y Representative: _____

1. Membership Type (Mark one)

- ☐ Two adult + youth ☐ Adult Single ☐ Young Adult 19-23 ☐ CrossFit 2 adult + youth
☐ One adult + youth ☐ Over 60 couple ☐ Youth 18 & under ☐ CrossFit adult couple
☐ Adult couple ☐ Over 60 single ☐ Over 80 Free Membership ☐ CrossFit adult single

2. Member Information (Registered Sex Offenders are prohibited from Y Property, all members are screened against the National Offender Database.)

Adult First Name _____ MI _____ Last _____

☐ Male ☐ Female Date of Birth ____/____/____ Employer _____

Second Adult First Name _____ MI _____ Last _____

☐ Male ☐ Female Date of Birth ____/____/____ Employer _____

Address _____ City, State, Zip _____

Primary Phone _____ Alternate Phone _____ E-mail _____

Emergency Contact _____ Relationship _____ Phone _____

#	Dependent/Children's Names	M/F	Date of Birth	Relationship	School	Grade
03						
04						
05						
06						
07						

3. What activities would you like to participate in at the YMCA? _____

4. Are you interested in volunteer opportunities? ☐ Yes ☐ No

5. Would you like to donate to our Annual Support Campaign? ☐ Yes ☐ No

- ☐ One time donation - amount to be added to your first month's membership draft: \$ _____
☐ Monthly donation - amount to be added to each month's membership draft: \$ _____
☐ Other - Please speak with YMCA staff for other donation opportunities

6. Payment Information

Draft Date: ☐ 1st of the month ☐ 15th of the month

Credit/Debit Card:

Card Type: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Name on Card: _____

Card Number: _____ - _____ - _____ - _____ Expiration Date: ____/____

Checking/Savings Account (Please attach a voided check for account verification.)

Bank Routing Number: _____ Account Number: _____

7. Monthly Draft Information: Signing below authorizes draft from the account requested. 30 day cancellation notice is required to stop draft. If your account does not have sufficient funds available when the Y charge attempts to clear and is returned unpaid, an additional returned payment fee (minimum of \$35) will be withdrawn from your bank account/credit card.

In consideration of gaining membership or being allowed to participate in the activities and programs of the YMCA and to use its facilities, equipment, and machinery in addition to the payment of any fee or charge, I do hereby waive, release, and forever discharge the YMCA and its officers, agents, employees, representatives, executors, and all others from any and all responsibilities or liability for injuries or damages resulting from my participation in any activities or my use of equipment or machinery in the above mentioned facilities or arising out of my participation in any activities at said facility. I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any those mentioned or others, acting on their behalf or in any way arising out of or connected with my participation in any activities of the YMCA or the use of any equipment at the YMCA. I agree to adhere to all policies set by the YMCA.

Note: Photo is required when signing up for a membership.

8. Signature _____ Date _____

MEMBERSHIP RATES

MEMBERSHIP TYPE	AUTOMATIC MONTHLY DRAFT	ANNUAL RATE	TEMP 30 DAY
Two Adults, plus youth two adults with dependent youth all in same household	\$75	\$900	\$ 85
One Adults, plus youth one adult with dependent youth in same household	\$58	\$696	\$ 68
Adult Couple Two adults in the same household	\$65	\$780	\$ 75
Adult Single Ages 24 – 59	\$47	\$564	\$ 57
Over 60 Couple Two adults in the same household at least one adult must be over age 60.	\$49	\$588	\$ 59
Over 60 Single	\$40	\$480	\$ 50
Youth Age 18 and under	\$24	\$288	\$ 24
Young Adult Single Ages 19 – 23	\$35	\$420	\$ 35
Active Over 80 Ages 80 and over	FREE	FREE	FREE

Age Guidelines:

Children under age 5 must be directly supervised by an individual age 14 or older at all times. All Children under age 8 must have an individual age 14 or older present in the facility.

Must be age 14 or older to utilize the fitness equipment and weight room areas or completed Youth Equipment Orientation with YMCA.

Swimming Pool:
Children under age 8 with floatation devices must be directly supervised by a person age 14 or older in water.

*Sex Offenders are not allowed on YMCA property. Our Membership Database is scanned nightly.

Unsupervised youth 13 and under must vacate the facilities by 8:00 pm, Mon. – Thur. during the school year.

Day Pass: Family: \$20 | Ages 2 – 4: \$4 | Ages 5 – 59: \$8 | Ages 60+: \$5

YMCA + CrossFit Ground Up Membership

YMCA + CROSSFIT\$273.90/mo
Two Adults plus all youth membership
(All youth in household)

YMCA + CROSSFIT Adult Single\$144.60/mo

YMCA + CROSSFIT Adult Couple\$219.90/mo
(Two adults in the same household)

Facility Hours

Mon – Fri: 5:00 am – 10:00 pm
Sat: 7:00 am – 8:00 pm
Sun: Noon – 8:00 pm

16th St. facility closed for renovation
Only the pool is accessible at the 16th St. YMCA

Sundays: 12:00 pm – 7:00 pm
Monday – Friday: 5:00 am – 9:00pm
Saturdays: 7:00 am – 7:00 pm

Child Watch Hours

Monday – Friday: 8:00 am – 1:00 pm & 4:15 pm – 8:00 pm
Saturday, 8:00 am – 12:00 pm | Sunday: closed

Financial Assistance Scale

Gross Annual Income	Number in Family							
		1	2	3	4	5	6	7
	\$16,000	50%	50%	50%	50%	50%	50%	50%
	\$19,000	50%	50%	50%	50%	50%	50%	50%
	\$22,000	25%	50%	50%	50%	50%	50%	50%
	\$24,000	0	25%	50%	50%	50%	50%	50%
	\$26,500	0	25%	50%	50%	50%	50%	50%
	\$30,000	0	25%	25%	50%	50%	50%	50%
	\$32,000	0	0%	25%	50%	50%	50%	50%
	\$34,000	0	0	25%	25%	50%	50%	50%
	\$37,000	0	0	25%	25%	50%	50%	50%
	\$39,000	0	0	0	25%	25%	50%	50%
	\$42,000	0	0	0	25%	25%	50%	50%
	\$45,000	0	0	0	25%	25%	25%	50%
	\$48,000	0	0	0	0%	25%	25%	50%
	\$53,000	0	0	0	0	25%	25%	25%
	\$60,000	0	0	0	0	0	25%	25%
\$68,000	0	0	0	0	0	0	25%	

Hastings Family YMCA
1430 W 16th St | 1220 W 18th St
402-463-3139
hastingsymca.net