

Central Community Fitness

Membership Terms and Conditions

Hours of Operation:

- Open 24 hours a day. Closed on Sundays from 8:00am-12:00pm.
- Junior/Senior Student Open Hours are from 3:30pm-4:30pm, Monday through Friday during the school year.
- The Central High School Gym is open for walking from 8:30am-10:00am during school days. Enter through the main entrance of the High School office.

Memberships:

- All memberships are subject to a one-time card activation fee of \$10.00 per card.
- Current Central families will not be charged monthly or annual fees (other than a one-time card activation fee).
- Fees are \$20/month (individual) or \$50/month (family).
- Lost key cards have a replacement fee of \$20 (applies to all memberships).
- A one-week visitor membership is available for \$10. Please come to the High School office to pick up and return your keycard.
- Each fitness center user must swipe the key card before each use of the fitness center. Sharing or borrowing cards is prohibited.

Dues:

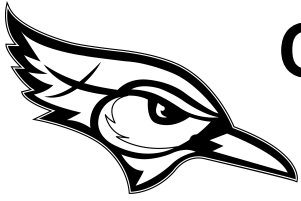
- Paid memberships may be set up with auto-pay withdrawn from a bank account. Other arrangements for payment may be made with the High School office.
- All memberships will continue on a month-by-month basis, until written notice is given 30 days prior to the desired date of cancellation. Prepaid memberships are refundable on a prorated basis.
- Monthly dues for the following month will be collected electronically around the 15th of the month from the designated account.

Suspension/Termination by Management:

- Dues must be current at all times or fitness membership will be suspended or terminated.
- Central Minnesota Christian School also reserves the right to suspend and/or terminate any membership for behavior detrimental to the enjoyment of the Central Community Fitness (CCF) by other members and staff for any reason deemed sufficient in the sole discretion of Central Administration.

Central Community Fitness Rules:

- Students 16 and older are allowed to use the fitness center without supervision. Students who are 15 and under must have a parent/coach present. Students 5th grade and under are not permitted into the CCF.



Central Community Fitness

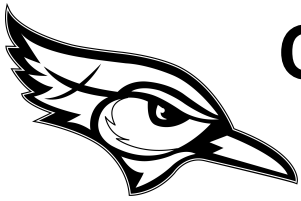
- Clean, dry shoes must be worn.
- Please report any damaged or malfunctioning equipment to a Central staff member immediately.
- Do not drop weights or dumbbells.
- Return all weights and equipment to the proper racks and storage spaces after usage.
- Modest workout attire is required.
- Limit the use of cardiovascular equipment to 30 minutes when others are waiting.
- Wipe off all equipment when finished. Towels and cleaning supplies should be available.
- No food in the fitness center.

Personal Property:

- Central School and Community Fitness is not responsible for any lost or stolen items.

Medical Clearance:

- It is recommended that all members participate in a medical screen and consent to clearance from their personal physician before beginning an exercise program. The member warrants and represents that the member or any family member or guest entitled to use the facilities of the Community Fitness Center under the terms of membership, has no disability, impairment, or ailment preventing him/her from engaging in active or passive exercise, or that will be detrimental or adverse to such person's health, safety, or physical condition if he/she does so engage or participate.



Central Community Fitness

The member acknowledges and agrees that:

- Central Community Fitness will rely on the foregoing warranty in issuing the membership.
- Central Community Fitness shall have no obligation to perform a fitness assessment or similar testing to determine the member's physical condition.
- Central Community Fitness shall not be liable for any injury arising out of the member's disability impairment or ailment preventing him/her from engaging in active or passive exercise, or that would be detrimental or adverse to such person's health, safety, or physical condition if he/she does so engage or participate. Each member and guest should be aware of his/her medical history and should consult with a physician prior to engaging in exercise or continuing to exercise if a medical condition appears or appears to be developing.

Agreement and Release of Liability:

- Central Community Fitness will provide access to the building using a card access system.
- I acknowledge that supervision is not provided at the facility.
- I acknowledge that the use of the card access system by someone other than myself will result in loss of membership with no refund.

Acceptance and Agreement

- I hereby agree to accept and abide by the terms of this membership application and agreement. I understand that this membership agreement is for a term of twelve months and will continue thereafter on a month-to-month basis unless canceled by me with 30 days advance written notice.
- I hereby authorize Central Community Fitness to effect payment for monthly dues and approved membership charges for the duration of my membership through electronic funds transfer. This authorization is to remain in full effect until Central has received written notification from me on cancellation in writing 30 days prior to requested cancellation date.
- I agree to release and hold harmless Central Community Fitness, and Central and its employees from any loss, liability, claim of bodily injury or property damage, or costs which may arise due to my use of Central Community Fitness equipment and my participation in programs as governed by the laws of Minnesota.

I, _____, have read and agree to the terms and conditions stated above. I understand that this membership agreement can be terminated at anytime if the rules and regulations are not followed.



Central Community Fitness

Signature

Date

Personal Information

Name

Address

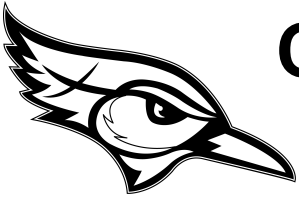
Phone Number

Emergency Contact and Phone Number

Member signature

Date

Accepted by Date / Initials / Payment Type



Central Community Fitness

Authorization for Automatic Payments

COMPANY: Central Minnesota Christian School

Company ID Number: 41-0784388

I hereby authorize Central Minnesota Christian School, hereinafter called COMPANY, to initiate debit entries to my (our) checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same in such account.

DEPOSITORY

CITY

STATE

ZIP

ROUTING/ABA No.

ACCOUNT NUMBER

This authority is to remain in full force and effect until COMPANY and DEPOSITORY have received written notification from me (or either of us) of its termination in such time and in such a manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name

Social Security Number



Central Community Fitness

Date

PLEASE ATTACH A VOID CHECK