

# Southington-Cheshire Community YMCAs

## CODE OF CONDUCT

1. The YMCA is committed to providing a safe and welcoming environment for all members and guests. To promote safety and comfort for all, we ask individuals to act appropriately at all times when they are in our facility or participating in our programs.
2. We expect persons using the YMCA to behave in a mature and responsible way and to respect the rights and dignity of others. Our Code of Conduct does not permit language or any action that can hurt or frighten another person or that falls below a generally accepted standard of conduct.
3. Prohibited actions specifically include:
  - Inappropriate attire. Appropriate attire must be worn at all times.
  - Angry or vulgar language includes swearing, name-calling or shouting.
  - Physical contact with another person in any angry or threatening way.
  - Any demonstration of sexual activity or sexual contact with another person.
  - Harassment or intimidation by words, gestures, body language or any menacing behavior.
  - Theft or behavior that results in the destruction of property.
  - Carrying or concealing any weapons or devices or objects that may be used as weapons.
  - Using or possessing illegal chemicals or alcohol on YMCA property, in YMCA vehicles or YMCA sponsored programs.
  - Use of cell phones or video/photography devices of any kind in the facility, other than the lobby.
  - Loitering in or outside of the YMCA.
  - Any other conduct of any inappropriate, threatening or offensive nature.
4. We ask that all members are mindful of their personal hygiene. We do reserve the right to ask a member to leave the facility if they exhibit offensive odor.
5. Use of video recorders, photography (and the like) is prohibited unless approved by the Branch Directors. Cell phone use is also prohibited except in lobbies.
6. Smoking is not permitted inside or outside the YMCA. The Southington Community YMCA is a smoke free environment.
7. Members are expected to comply with all Southington Community YMCA policies including but not limited to our Supervision Policy, and any program-specific policies.
8. Members and guests are encouraged to be responsible for their personal comfort and safety, and to ask any person whose behavior threatens their comfort to refrain from doing so. If a member or guest feels uncomfortable in confronting the person directly, they should report the behavior to a staff person or director on duty.
9. YMCA staff members are eager to be of assistance. Members and guests should not hesitate to notify a staff member if assistance is needed.
10. In order to be able to carry out these policies, we ask that members and guests identify themselves to staff when asked.

**Member Signature:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_

**I would like to be a YMCA Volunteer in the following area(s):**

- Program   
  Clerical Support   
  Forever in Blue Jeans   
  Child Care   
  YMCA Camp Sloper  
 Committee   
  Apple Harvest Race   
  Togetherhood (Member led community service opportunities)

**OFFICE USE ONLY**

**Membership Type:** \_\_\_\_\_ **Staff:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Billing Code:** CC    BD    Full    **Renewal Date:** \_\_\_\_\_    **Raptor:** Y    N

Date	Amount	Receipt	Date Posted



# Southington-Cheshire Community YMCAs

## Membership Application

**FOR OFFICE USE ONLY - Membership Number** \_\_\_\_\_

**PLEASE SELECT TYPE OF MEMBERSHIP:**

- Youth (0-13)   
  Teen (14-17)   
  Young Adult (18-25)   
  Adult (26+)   
  2 Adult (26+)
- Family 1   
  Family 2   
  Family 3   
  Family 4   
  Family 5   
  Staff
- Senior (65+)   
  Senior Couple (1 Person 65+)   
 \*Corporate (Pay Stub Req.)   
 Virtual   
 Virtual Family

**PRIMARY MEMBER:**

Prefix: \_\_\_\_\_ First Name:\* \_\_\_\_\_ MI \_\_\_\_\_ Last Name:\* \_\_\_\_\_

Gender:\* \_\_\_\_\_ Date of Birth:\* \_\_\_\_/\_\_\_\_/\_\_\_\_ Employer: \_\_\_\_\_

Address:\* \_\_\_\_\_ City:\* \_\_\_\_\_ State:\* \_\_\_\_\_ Zip:\* \_\_\_\_\_

Home Phone\*: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Referred by: \_\_\_\_\_

Emergency Name:\* \_\_\_\_\_ Relation: \_\_\_\_\_ Phone:\* \_\_\_\_\_

**The following is confidential information and is used only as a method to determine if the YMCA is serving a representative portion of our service area. It will not be used or sold for any reason.**

Ethnicity:  African-American   
 Asian   
 Hispanic   
 Native American   
 Indian  
 Pacific Islander   
 Caucasian   
 Other

Family Income:  \$0-\$25,000   
 \$25,000-\$50,000   
 \$50,000-\$100,000   
 \$100,000+

**FAMILY MEMBER:**

First Name	M.I.	Last Name (if different)	Birth Date	Gender

Member Number:

First

Last

Name:

**Southington-Cheshire Community YMCAs**  
**CREDIT CARD / BANK DRAFT AUTHORIZATION FORM**

The credit card draft plan is a continuous membership plan. I understand that this membership will remain in effect for as long as I retain the membership card (s) issued to me and/or my family members.

Each monthly credit card draft will be payment for my membership dues for the current month.

I understand that if I wish to terminate or change my membership in any way, I must give the YMCA a 30-day written notice.

Initial \_\_\_\_\_ Date Signed \_\_\_\_/\_\_\_\_/\_\_\_\_

The YMCA Board of Directors may, at their discretion, adjust the monthly rate applicable to my category of membership. I understand that I will receive at least four weeks written notice prior to any such change.

Should any membership draft not be honored by my credit card company or bank for any reason, I realize that I am still responsible for that payment, plus a service charge applied by the YMCA. The YMCA reserves the right to terminate membership due to lack of payment. I also understand that my membership will not be renewed until any outstanding balance is paid in full.

I have given the authority to the credit card company or bank listed below to honor monthly drafts drawn by the YMCA on my account for membership payments. As a convenience to me, I hereby request and authorize you to pay and charge my credit card or bank account.

Please charge my membership payment to my credit/debit card or bank account. Payments will begin on \_\_\_\_/\_\_\_\_/\_\_\_\_ and will be charged on the 1<sup>st</sup> or 15<sup>th</sup> of each month. The credit card or bank draft plan is a continuous membership plan.

If you wish to terminate this agreement, you may do so at any time upon the receipt of a written cancellation by the Southington-Cheshire Community YMCAs.

**Payment Option One: Credit Card Authorization**

Member Name: \_\_\_\_\_ Monthly Membership Rate: \$ \_\_\_\_\_

Name on Credit/Debit Card: \_\_\_\_\_ Type of Card: ( ) MasterCard ( ) Visa ( ) Discover

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Credit Card Expiration Date: \_\_\_\_/\_\_\_\_

CVV #: \_\_\_\_ (3 digit code on back of card) Billing Zip Code of Card Holder: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**Payment Option Two: Bank Draft Authorization**

**\*Check needed for Bank Draft option**

Member Name: \_\_\_\_\_ Bank Name: \_\_\_\_\_

Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

Account Holder's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**For Office Use ONLY:**

All following drafts will occur on the:

Draft Set Up (Initials): \_\_\_\_\_

Draft Date: 1st 15th

Date: \_\_\_\_\_

**Southington-Cheshire Community YMCAs**  
**RELEASE AND WAIVER'S**

**LIABILITY AND INDEMNITY AGREEMENT:**

In consideration for being permitted to utilize the facilities, services, and programs of the YMCA for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for themselves and any personal representatives, hereby acknowledges, agree and represent that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participate in such affiliated program constitutes an acknowledgment that such premise and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- THE UNDERSIGNED HEREBY RELEASES, WAIVES; DISCHARGES AND COVENANTS NOT TO SUE THE YMCA, its directors, officers, employees, and agents (Hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise affiliated with the YMCA, without respect to location.
- THE UNDERSIGNED HEREBY WAIVES AND RELEASES the Southington -Cheshire Community YMCAs from any and all liability should you contract CoVid-19 while at any of the Y's facilities, functions, gatherings, or events.
- THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
- THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.
- THE UNDERSIGNED further expressly agrees that the RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Connecticut and that is any portion thereof is held invalid, it is agreed that the balance shall, not withstanding, continue in full legal force and effect.
- THE UNDERSIGNED gives their permission for the Southington Community YMCA to take/use photographs, slides, moving pictures or video tapes of the person named on this application.
- THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.
- THE UNDERSIGNED acknowledges that they received the Southington Community YMCA PAR-Q.

**NATIONWIDE MEMBERSHIP NOTICE:**

- By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.
- The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

**TERMS AND CONDITION:**

- Memberships are non-refundable and non-transferable.
- Please present your membership card for admission. No privileges can be obtained without it.
- I understand that the YMCA is a not-for-profit organization and I may be asked for a contribution above and beyond my membership fees.
- Participation in some YMCA activities may pose potential for physical risk. In joining, I assume responsibility for my safety and agree to hold the Southington Community YMCA harmless against any liability, loss, damage, or injury suffered as a result of participation in YMCA activities.

Member Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_