

CENTENARY FITNESS CENTER

MEMBERSHIP AGREEMENT

**denotes required fields*

*First Name _____ *Middle Initial _____ *Last Name _____

Preferred name _____ *Birth date _____ *Marital Status _____

*Gender Male Female

*Address _____

*City _____ *State _____ *Zip _____

*E-mail Address _____ *Phone _____

*How did you hear about the CFC? _____

*Emergency Contact _____ *Phone _____

*Primary Member (for family or corporate memberships) _____

*Dependents (for family memberships) _____

Individual Membership:
circle one \$495/yr. or \$45/mo.
Plus \$25 initial sign-up fee

Family Membership:
circle one \$825/yr. or \$75/mo.
Plus \$50 initial sign-up fee

Discount Eligible Individual Membership:
circle one \$396/yr. or \$36/mo.
Plus \$25 initial sign-up fee

Discount Eligible Family Membership:
circle one \$660/yr. or \$60/mo.
Plus \$50 initial sign-up fee

20% Eligible Discount (circle if applicable):
Alumni | Student (18 or older) | Active Military | Senior Citizen (65 or older) | UMC Clergy

Corporate Membership:
Name of Company _____

Locker Rental:
circle one \$100/yr. or \$10/mo.
Must also sign Locker Rental Agreement

***Billing Information (choose one):**

Visa Discover
 MasterCard American Express
Card No. _____
Expiration Date _____

Bank Account
Name of Bank _____
Routing No. _____
Account No. _____

This membership is for the use of Centenary's Fitness Center and all activities that apply within. I agree to adhere to all guidelines/policies stated and understand that if I do not comply my membership can be cancelled with no refund.

*By signature I agree to pay fees of \$ ____ for a membership with automatic annual or monthly renewal for one year. **This is a contract for a year membership.** Fees will remain the same for 12 months and may rise at the end of one year. The member will be notified in writing prior to any change in membership fees.

*Print Name _____ *Date _____

*Signature _____