



For Office Use Only:	Membership Type:
License # State	Membership Number
<input type="checkbox"/> NSOPW checked for <b>all</b> adults	YMCA Staff Member Processing
<input type="checkbox"/> Photo taken	
<input type="checkbox"/> Member Handbook given	
<input type="checkbox"/> Draft form explained and given	YMCA STAFF / VOLUNTEER {please circle if applies}

Adult or Teen Information

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Sex: M F

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Second Adult Information (Family Membership Only)

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_ Sex: M F

Youth Information (Family or Youth Membership Only)

Name: \_\_\_\_\_ Sex: M F D.O.B: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: M F D.O.B: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: M F D.O.B: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: M F D.O.B: \_\_\_\_\_

Name: \_\_\_\_\_ Sex: M F D.O.B: \_\_\_\_\_

***Please read and sign the following Waiver, Authorization and Release:***

I hereby grant permission for my children to receive emergency medical treatment for illness or accident if I cannot first be contacted. I give permission to the Auburn-Lewiston YMCA to use photographs and/or videos of myself and above listed family members for promotion, public relations, records or other legitimate purposes.

**I have read and understand this waiver, authorization, and release, and by signing it agree to the terms.**

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

- Please initial if you have read and understand the following:*** ***Date initialed*** \_\_\_\_\_
- I am at least 18 years old and/or the legal parent or guardian for the above family members.
  - I understand the YMCA is not responsible for personal property lost, damaged, or stolen while members and/or program participants are using YMCA facilities, on YMCA premises, or involved in YMCA programs
  - I understand that all memberships are non-transferable and non-refundable.
  - I have read and understand the waiver conditions on the reverse page.