



Membership Application

Date: ___/___/___

First Name _____ Middle Initial _____ Last Name _____

(Primary Member, Parent or Guardian) Gender: Male Female Birthdate ___/___/___

Email Address: _____ Phone #: _____ 2nd Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Additional Family Members Including dependents

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

Family Memberships cover the first four (4) members. Additional dependents over the age of 8 are charged an additional monthly fee. All family members who attend the facility must be registered.

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

First Name: _____ Last Name: _____ DOB: ___/___/___ Relationship to Primary Member: _____

Emergency Contact:

First Name: _____ Last Name: _____

Emergency Phone: (____) _____ Email: _____

Relationship to Primary: _____

Membership Type: ___ Regular ___ Senior ___ Veteran ___ 1st Responder ___ Student ___ Family

Accepted Insurance Programs – Subject to Verification

- Silver Sneakers – 16 Digit Tivity ID # _____
- Renew Active by United Healthcare, One Pass, Aaptiv Advantage (Optum Fitness)
(Begins w/letter A,S,G,) _____
- Silver & Fit (verify online using First Name, Last Name, DOB)
- Active & Fit Enterprise (verify online using First Name, Last Name, DOB)
- Active & Fit Direct (verify online using First Name, Last Name, DOB)

Payment Options - Circle One

Standard Membership (Month to Month): Memberships will auto renew every 30 days, unless agreed upon in advance.

Yearly Rate (Must pay in full for Discount): Auto Renew (yes / no)

Membership Terms and Conditions

- For Members that are paying monthly, a membership cancellation must be made at least 5 days prior to the members next billing date.
- If at any time during membership, your card or account is declined, your membership will be noted as outstanding, and you will be notified via email within 5 days to update your account, and you will be denied access until the balance is paid.
- Members will be notified both 2 months and 1 month in advance of their card or account expiring.
- If a member cancels within the last 5 days of the next billing date, they will still be charged for the following month and will have access to the facility for that month.
- The members must turn in their ID card on the last day of the month of their membership.
- For members that are paying yearly, there will be no refunds made for memberships cancelled in the middle of the term.
- Memberships may be cancelled due to relocation outside of 30 miles of Narrow Valley Sports, for valid medical reasons with written documentation from physician, or military leave with valid documentation.
- Documentation MUST be provided for verification.
- Members are expected to abide by all facility rules and regulations, failure to do so will result in cancellation of membership privileges without refund.

I understand all terms and conditions of membership.

Signature

Date:

Printed Name