

Relationship:

CYI Community Center Registration Form

Guest Type:	Alternate Key ID:						
For youth members (ages 0–18), a part sign the back of this form, and also red and Waiver of Liability (stapled to this	ad and	sign the CYI II		-		ction below,	
ALL FIELDS ON THIS FORM ARE REQUIRED							
Primary Adult			Second Adult				
First Name:		MI:	First Name:			/II:	
Last Name:	a	Check here for active military //veteran	Last Name:		act	eck here for tive military eteran	
Address:				Home P	hone I	Number:	
City, State, ZIP:							
Cell Phone Number:			Cell Phone Number:				
Do you agree to receive text messages about closures & cancellations? Yes No If yes, cell service provider *Your carrier's data rates may apply			Do you agree to receive text messages about closures & cancellations? Yes No If yes, cell service provider *Your carrier's data rates may apply				
Email:			Email:				
Male Female Date of Birth:			Male Female Date of Birth:				
Primary Adult Emergency Contact In	forma	ation:	Second Adult Emergency Contact Information:				
Name:			Name:				
Phone Number:			Phone Number:				
Relationship:			Relationship:				
How did you hear about us?							
		Youth/Dep	 nendents				
1) First Name: MI:						MI:	
Last Name:			Last Name:				
Date of Birth:	Mal	e Female	Date of Birth:		Male	e Female	
3) First Name:		MI:	4) First Name:			MI:	
Last Name:			Last Name:				
Date of Birth:	Male Female		Date of Birth:		Male	Female	
Emergency Contact Information (for the Youth/Dependents):							
Name:			_				
Phone Number:			_				

Code of Conduct:

Crivitz Youth, Inc. (CYI) is committed to providing a safe and welcoming environment for all members and guests. Guests are expected to act appropriately at all times when in our facilities or participating in our programs. Inappropriate behavior or language deemed to conflict with the welfare and safety of guests and staff is strictly prohibited on CYI properties and could result in loss of membership and program participant privileges. Such behaviors include, but are not limited to, cursing, abusive language, fighting, theft, or behavior that results in the destruction or loss of property, and any other verbal or physical conduct of sexual or abusive nature. Additionally, persons who are under the influence of drugs or alcohol will be asked to leave the premises and authorities will be called. Family friendly workout attire and close toed shoes are required at all times in public areas of CYI. CYI retains the right to suspend or cancel service and/or impose fines on any guest for any behavior in violation of current or subsequently issued policies.

Registered Sex Offender & Criminal History Policy:

Crivitz Youth, Inc. (CYI) is committed to maintaining a safe environment for all members, program participants, and guests, with particular attention to the protection of children and youth.

Screening & Identification: *All visitors or prospective members 18 years or older must present a valid government-issued photo ID.* Acceptable forms of identification include: State Driver's License or State Photo ID card, Resident Alien ID card, Military ID, Passport ID card, Mexican Consulate card.

All adults applying for membership, program participation, employment, or volunteering will be screened using the Nationwide and Watchdog systems, which identify registered sex offenders.

Denial of Access / Membership: CYI reserves the right to deny membership, program participation, employment, or volunteering to any individual who: Is currently required to register as a sex offender, regardless of offense date or current activity; Has been accused or convicted of any crime involving sexual abuse; Has ever been convicted of any offense relating to the use, sale, possession, or transportation of narcotics or habit-forming and/or dangerous drugs; Is presently or habitually under the influence of dangerous drugs, chemicals, narcotics, or intoxicating beverages.

Revocation of Access: If a current member, participant, employee, or volunteer is later discovered to meet any of the above criteria, membership, employment, or program privileges will be immediately revoked or terminated, and law enforcement may be notified as required by law.

Member & Guest Safety Reporting: Anyone who feels uncomfortable confronting a person directly should report the behavior to a staff member on duty. CYI staff members are trained and eager to assist. Members and guests should not hesitate to notify a staff member if assistance, intervention, or guidance is needed.

Acknowledgment: By signing below, I acknowledge and agree that CYI has the right to deny or revoke membership and program participation if I, or any adult household member, is found to be a registered sex offender. I understand this policy is in place to protect the safety and welfare of all CYCC members and participants.

Terms and Conditions:

Payment: Payment must be made in full and in advance of receipt of any program or service used. Cash, credit/debit cards, or checks made payable to Crivitz Youth, Inc. will be accepted at the front desk only. Any check returned to us due to NSF will be charged a \$32.00 fee. We will retain the option of refusing any future checks. Post-dated checks will not be accepted. Nonpayment will result in termination of enrollment.

Warranty: No implied warranties or representations are made. CYI expressly notes that results will differ for each guest based upon various factors, including, but not limited to, body type, nutrition, adequate rest, skill set, CYCC needs, etc. and no guarantees of results are possible.

Transfers, Cancellations, Freezes, and Refunds: Guests may not transfer membership to any other person. Only CYI may assign this membership to a related entity. If, for any reason, CYI cancels a program or service CYI will issue a refund in the form of a credit to the guest's CYCC customer account or to the guest's credit card. Cash or check refunds are at the discretion of the Director. If, for any reason, the entire CYCC facility is unavailable for more than 72 consecutive hours CYI will issue an extension for all active memberships or programs for the exact number of days the facility is closed minus any days the facility would normally be closed during that time period, i.e. holidays. Guests will be liable for programs or services used up to the time of closure. Otherwise, there are no refunds for unused programs or services except in the case of death, a disability, or an employment relocation. Requests for a refund due to these reasons must be disclosed to the Director in a written statement by a physician on the physician's letterhead or by the new employer on company letterhead. The guest will be liable only for programs or services used and will receive a refund for any unused portions of said programs or services. A membership freeze may be granted at the discretion of the Director following submission of the request in writing and for a limited number of reasons including, but not limited to medical or employment reasons, or vacation more than 7 consecutive days in length. A freeze on a family membership will apply to all members included in that family.

By my signature below, I agree to abide by the CYI Code of Conduct, the terms and conditions outlined above, and the Registered Sex Offender & Criminal History Policy.

Adult Signature	Date
Adult Signature	Date
Youth Signature	 Date
Youth Signature	Date
Youth Signature	 Date
Youth Signature	 Date



INFORMED CONSENT/AGREEMENT TO PARTICIPATE/ WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT FOR ALL CRIVITZ YOUTH, INC. SERVICES

- I, through the purchase of Crivitz Youth Inc. (hereafter, CYI) programs and services, have agreed to voluntarily participate in services and programs offered at Crivitz Youth Inc., Community Center (hereafter, CYCC) including but not limited to aerobic exercise, strength training, flexibility development, swimming, and youth sports.
- 1. I have been offered the opportunity to participate in a pre-activity screening and advised to follow the recommendations given to me based on the results of said screening.
- 2. I understand that CYI is not responsible for personal property lost, damaged, or stolen while members or guests are using CYCC facilities, on CYCC premises, or involved in CYCC programs.
- 3. I give my permission to CYI to use without limitation or obligation, photographs, video footage, or recordings which may include my or my children's image or voice for the purposes of promoting or interpreting CYCC programs. Guests may choose to decline at any time.
- 4. I understand and am aware that physical fitness activities, including the use of equipment, are potentially hazardous activities. I am aware that even when completed properly, participating in these types of activities can be dangerous and because of this, I agree to follow any instructions regarding proper techniques and training, as well as other organizational rules. I am aware that potential risks associated with these types of activities include, but are not limited to: death, fainting, disorders in heartbeat, serious neck and spinal injuries that may result in complete or partial paralysis or brain damage, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the musculoskeletal system, and serious injury or impairment to other aspects of my body, general health, and well-being.
- 5. CYI will provide the equipment to be used in connection with all programs and services offered on CYI property, including but not limited to benches, dumbbells, barbells, cardio equipment and similar items. I represent and warrant any and all equipment I provide for workout sessions located on or off CYI property is for personal use only. CYI has not inspected my equipment and has no knowledge of its condition. I understand that I take sole responsibility for my equipment. I acknowledge that although CYI takes precautions to maintain equipment, any equipment may malfunction and/or cause potential injuries. I take sole responsibility to inspect any and all equipment prior to use, whether it belongs to me or CYI.
- 6. Although CYI will take precautions to ensure my safety, I expressly assume and accept sole responsibility for my safety and for any and all injuries that may occur. I will notify CYI of any significant injury that requires medical attention (such as emergency care, hospitalization, etc.) I hereby consent to first aid, emergency medical care, and admission to an accredited hospital or an emergency care center when necessary for executing such care and for treatment of injuries that I may sustain while participating in CYI programs and services.

- 7. In consideration for receiving permission to participate in CYI Programs and Services, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE and further hereby AGREE TO IDEMNIFY AND HOLD HARMLESS Crivitz Youth, Inc., the members of its Board (in their official and individual capacities), administrators, agents, servants or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, costs, expenses, attorney fees, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity, or while in, on or upon premises where the activity is being conducted, including traveling to and from sessions.
- 8. I am fully aware of and acknowledge the potential risks of serious personal injury associated with this activity. I hereby elect to voluntarily participate in said activity with full knowledge that said activity may be dangerous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH, which may be sustained by me, or any loss or damage of property, owned by me, as a result of being involved in such activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.
- 9. It is in my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a, RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES. I hereby further agree that this Waiver of Liability and Hold Harmless Agreement shall be construed in accordance with the laws of the State of Wisconsin.
- 10. I have been given an opportunity to ask questions as to the risks involved in voluntarily participating in the CYI Programs and Services. I understand that these exculpatory clauses are intended to apply to any and all activities occurring during the time for which I have voluntarily purchased CYI programs and services.

IN SIGNING THIS AGREEMENT, I ACKNOWLEDEGE AND REPRESENT THAT I have read this Liability and Hold Harmless Agreement, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am fully competent and not under duress; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Adult Signature	Date
Adult Signature	Date
Youth Signature	Date