



PRIMARY MEMBER INFORMATION				SWIPE CARD #	Photo
First Name	MI	Last Name		<input type="radio"/> Male <input type="radio"/> Female	Date of Birth
Address		Apt #	City	State	ZIP
Primary Phone () ()		Email () ()		Cell Phone () ()	
Email address (1): primary member		Employer		How did you hear about us?	
Emergency Contact		Emergency Phone #			

ADDITIONAL FAMILY MEMBERS: add adult members, then children

Family	First Name	Middle	Last Name	Date of Birth	Age	M/F	email	Photo
02								
03								
04								
05								
06								

Racine Family YMCA members seasonal pass

This is an add-on pass for current Racine Family YMCA members ONLY & must be a current Racine Family YMCA member for the entire season

General Public Seasonal Pass

Must be a Racine County resident to receive the Racine County resident rate, a drivers license must be presented to receive resident rate
Seasonal pass holder (general public) are eligible for a \$10 discount on SC Johnson Community Aquatic Center Swim Lesson

Terms & Conditions:

- General Public Seasonal Pass does not include access to the Racine Family YMCA branches.
- Seasonal Passes are non-refundable – no refunds will be issued. All passes expire: September 6, 2021
- Racine Family YMCA is not responsible for lost or stolen passes, passes may be replaced for \$5 per card.
- Children 7 & under are required to be directly supervised at all times by a supervising adult.
 - Children under 3 must be in the water within arms reach of a supervising adult
 - Children 4-7 must be in the water with an adult, take a swim test and stay in area defined by colored wristband
- Children 8-11 are required to be accompanied by a supervising adult who remains in the waterpark, take a swim test & stay in areas defined by non-swimmer area
- Racine Family YMCA is not responsible for loss or damage of valuable or property of members or guests.
- As a Racine Family YMCA member, I understand I must remain a RACINE FAMILY YMCA member for the entire season or my seasonal upgrade will be suspended.
- The Racine Family YMCA reserves the right to suspend or revoke seasonal pass privileges of participants whose behavior is deemed inappropriate or detrimental to the well being of the facility, its staff and/or members & guests, or is incompatible with the mission of the facility and its equipment will not be tolerated. Seasonal Passes may be cancelled for violation of the general operating rules of Racine Family YMCA and/or the SC Johnson Aquatic Community Aquatic Center Policies and Rules.

Membership Agreement: *Primary member is signing on behalf of all people on this membership*

I agree to the purpose of the RACINE FAMILY YMCA and it's four core values of Honesty, Respect, Caring and Responsibility, and to abide by the rules and regulations established by the Board of Directors. I understand that after purchase, my membership is non-refundable and non-transferable. I further understand my membership card is the property of the RACINE FAMILY YMCA and that all rates, fees, and schedules are subject to change without notice. In consideration of my participation in the activities of the RACINE FAMILY YMCA, I do hereby agree to the HOLD HARMLESS RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT, IMAGE PERMISSION WAIVER and MONTHLY waiver on the back page. I hereby do declare myself to be physically sound, having medical approval to participate in the activities of the RACINE FAMILY YMCA. A member is a person who agrees to cooperate with others in the accomplishment of the YMCA's accepted purpose, recognized the fact that membership embraces all types of members and involves identification with a worldwide fellowship, and, after due application, is individually enrolled in the Association. I also understand that this application will be stored electronically and the original will be set to shred.

Primary Member Signature of Agreement:	Date:
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STAFF USE ONLY

<input type="checkbox"/> YMCA Member	<input type="checkbox"/> Youth: 3-17yr	<input type="checkbox"/> Add-On: 1 adult	<input type="checkbox"/> Early Bird Discount	<input type="checkbox"/> DL Verified
<input type="checkbox"/> Racine County Resident	<input type="checkbox"/> Adult: 18-61	<input type="checkbox"/> Add-On: 2 adults	<input type="checkbox"/> Corporate	<input type="checkbox"/> Residency Verified
<input type="checkbox"/> Non Resident	<input type="checkbox"/> Senior: 62+	<input type="checkbox"/> Add-on: 1 child	<input type="checkbox"/> Courtesy	
	<input type="checkbox"/> Household: 1 adult + 3 kids	<input type="checkbox"/> Add-On: 2 children		
Date:	Staff Initials	Amount \$	Location	<input type="radio"/> Cash <input type="radio"/> Check <input type="radio"/> Credit Card