

Primary Membership Information

Name: _____ Today's Date: _____
 Address: _____ DOB: _____
 City/State/Zip: _____ Gender: _____
 Email Address: _____ Home/Cell Phone: _____
 Emergency Contact Name: _____ Business Phone: _____
 Emergency Contact Phone: _____
 How did you hear about us? _____

Supplemental Membership Information

Spouse/Domestic Partner: _____ DOB: _____
 Email Address: _____ Gender: _____
 Home/Cell Phone: _____

 Legal Dependent: _____ DOB: _____
 Gender: _____
 Legal Dependent: _____ DOB: _____
 Gender: _____
 Legal Dependent: _____ DOB: _____
 Gender: _____
 Legal Dependent: _____ DOB: _____
 Gender: _____

Acknowledgement of Understanding

I have read the terms and conditions on the reverse side of this application, fully understand the terms, and understand that they affect my legal rights. I am signing this Agreement knowingly and voluntarily, and intend for it to be a complete and unconditional release of liability to the greatest extent allowed by law.

Signature: _____ Date: _____

Office Use Only

Membership Type <input type="checkbox"/> Employee (not eligible for parking) <input type="checkbox"/> Alumni <input type="checkbox"/> Affiliate _____ <input type="checkbox"/> Recent Alumni <input type="checkbox"/> Cincinnati <input type="checkbox"/> Non-UC Student	Membership Length <input type="checkbox"/> Annual <input type="checkbox"/> 9 months <input type="checkbox"/> Semester <input type="checkbox"/> 3 months <input type="checkbox"/> Other: _____	Add-Ons <input type="checkbox"/> Spouse/Domestic Partner <input type="checkbox"/> Legal Dependent(s) <input type="checkbox"/> Parking <input type="checkbox"/> Locker <input type="checkbox"/> Towel
Payment Terms <input type="checkbox"/> Monthly Deductions \$ _____ Total Amount Drafted Monthly (if not paid in full) <input type="checkbox"/> Paid In Full \$ _____ Total Amount Collected at Time of Sign-Up	Renewal Date _____ Expiration Date _____	Payment Information <input type="checkbox"/> Cash (paid in full only) <input type="checkbox"/> Automatic Bank Draft <input type="checkbox"/> AMEX / Discover / MC / Visa (circle one) <input type="checkbox"/> Payroll Deduction (requires completion of additional form)
Member Services Representative (print name): Verification of entry in CSI (print name):		Date: _____ Date: _____

Terms and Conditions

Membership Terms

Account Renewal: Annual memberships are based on a one-year contract. Annual membership fees paid monthly will continue on a month-to-month basis after the first-year expiration date unless the membership is cancelled. Membership prices are subject to change. __ **Initial**

Recent Alumni Memberships: Recent Alumni are defined as graduating within the past 6 months. The recent alumni membership rate is good for one year and recent alumni members will automatically become an alumni member after the recent alumni membership renewal date. __ **Initial**

Refunding: Memberships are non-refundable unless cancelled within three days of purchase. __ **Initial**

Cancellations: Cancellation during the initial one year contract will be permitted after payment of a \$75 early termination/cancellation fee and completion of the online cancellation form (<https://www.uc.edu/campus-life/campus-rec/membership/membership-cancellation-form.html>). After the initial year contract has been completed, memberships will continue month-to-month until a cancellation form is submitted (no fee will be required after the initial contract is completed). Cancellation forms must be submitted by the 15th of the month prior to the desired cancellation month (ex: submit form by January 15 to not be charged for February). Non-payment, separation or retirement from the university is not considered a form of cancellation. __ **Initial**

Transferring Accounts: CR memberships are non-transferable. Membership privileges are to be used only by the person to whom the membership was issued.

Frozen Accounts: Annual memberships may be maintained as inactive or unexpired for a \$5/month fee. Months paid at a \$5 rate do not count toward the completion of an annual contract. Current membership rates will be applied to all reactivated memberships.

Suspensions/Terminations: CR has the right to suspend or terminate memberships for violation of policies or posted rules, failure to pay dues, or actions which violate federal, state, or local laws. Violation consequences may include suspension or termination of CR access privileges.

Facility Closings: During periods of severe inclement weather, public emergency, or other crisis, the president or a designated cabinet officer may announce, through the University of Cincinnati electronic mail system and through the local news media, that some or all of the university's offices and facilities are closed for part or all of a day. Campus Recreation will follow the university policy for snow delays and cancellations. Campus Recreation may close parts of the facility for maintenance purposes. Information about these closings will be posted on our website and in the facility. Campus Recreation will not reimburse membership dues for facility closings due to the above reasons.

Payment Authorized Statement and Overdue Balance Policy

I authorize the UC Department of Campus Recreation to obtain fee payment for the membership in which I have selected by the method I have indicated. I understand that if any payment is refused my membership will be suspended until payment is received. Non-payment, separation or retirement from the university is not considered a form of cancellation. Balances must be paid in full before membership will be re-activated. Memberships unpaid for two months will be sent to the Ohio Attorney General for payment. __ **Initial**

Informed Consent Waiver and Release of Liability

Assumption of Risks: Physical activity, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The Department of Campus Recreation (DCR), through its Campus Recreation Center (CRC) and Fitness Center at CARE/Crawley (FCCC), provides for activities such as weight lifting, running, aerobic activities, classes, and other sporting activities. These activities involve strenuous exertions of strength using various muscle groups, some involve quick movements using speed and change of direction, and others involve sustained physical activity that places stress on the cardiovascular system. The specific risks vary from one activity to another, but the risks range from 1) minor injuries such as scratches, bruises, and sprains; 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; and 3) catastrophic injuries including paralysis and death. I understand, and appreciate that the activities and programs at the CRC and FCCC carry certain inherent risks, and I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

Waiver of Liability and Indemnification: In consideration of permission to use, today and on all future dates, the property, facilities, staff, equipment, services, and programs of the DCR, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and agree not to sue the State of Ohio, the University of Cincinnati and its governing board, officers, employees, and agents ("Releasees") from any and all liability for any harm, injury, damage, claims, demands of any kind, actions, causes of action, costs and expenses that I may have or that hereafter may accrue to me, arising out of any loss, damage, or injury, including death, that may be sustained by me or any loss or damage to any property belonging to me, whether caused by the negligence, misfeasance, or nonfeasance of Releasees or otherwise while in or upon premises or equipment of the CRC and FCCC or engaged in any activity or program offered at and by the DCR.

I also agree to INDEMNIFY AND HOLD RELEASEES HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees, that result from my participation in or involvement with any program or activity at or associated with the CRC and FCCC and to reimburse Releasees for any incurred expenses. I further agree to comply with the stated and customary terms and conditions of participation and agree that if any unusual or significant hazard is observed, my activities will be discontinued and I will immediately bring such matter to the attention of the nearest official.

Authorization, Release, and Waiver

I authorize Campus Recreation to:

- 1) make and copyright photographic, audio, and/or video recordings of me;
- 2) use the original recordings as production elements in subsequent media projects;
- 3) use, reproduce, modify, distribute, and disseminate such recordings and projects, in any form, manner, or mode of electronic transmission, and for any purpose; and,
- 4) use my name, likeness, voice, and biographical material in connection with such recordings.

I release the University from any liability for errors of omission or commission caused by image or sound editing, human error, or other means. I waive the right to inspect or approve the finished projects.

I certify that I provide this authorization, release, and waiver for value rendered and expect no further financial compensation. I further certify that my performance will be free from libel, slander, and copyright infringement. I revoke all my prior elections on this subject matter.