

Office Use Only

Membership Type: Family SPF Adult Senior Adult Senior Couple Student SS S&F Teen Youth

Payment Plan: Bank Draft Quarterly Semi-Annual Annual Payroll Deduct Scholarship College

Amount Paid: \$ _____ **Corporate Group Name:** _____

Staff Signature: _____ **Date:** _____

Membership Checklist

____ **NEW MEMBER HANDBOOK, GROUP EXERCISE SCHEDULE, WATER AEROBICS SCHEDULE, POOL SCHEDULE, TAB**

____ Informed of 4 guest passes per year, 8 per family

____ Informed members of FitStart and make appointment (remember, 2 hours for a couple)

____ Informed about orientation appts. for youth (10-12) and Teen(13-14 yrs)

____ Lockers but no locks supplied

____ Inform members with children, must be 18 or older to utilize adult locker rooms

____ Gave them a Map & Amenities Sheet

____ Ask parents if children can use guest passes. Put message in billing members account, either Yes-children can use, or No-children cannot use

____ Was this membership a referral? (This question does not apply to Silver Sneakers, Silver & Fit, Special Family, Scholarship Recipients, Interns, Fosters, Employees and approved 1-month memberships).

**If they were referred, give them a referral card. Both referring member and new member have to fill out their part on the card.

***REMINDER: WHEN A CHILD IS LISTED ON A FAMILY MEMBERSHIP AND THEY ARE 23 OR OLDER, IN ORDER FOR THEM TO REMAIN ON THE FAMILY MEMBERSHIP, THEY MUST:**

- 1. BE COUNTED ON THE PARENT/LEGAL GUARDIAN INCOME TAX RETURN OR BE COVERED UNDER PARENT/LEGAL GUARDIAN MEDICAL INSURANCE**
- 2. NOT HAVE A FULL-TIME JOB**