



OUR PROMISE TO YOU

The Metro Atlanta YMCA endeavors to provide a safe environment and programs for you, your family and guests. The YMCA provides exciting, life-enhancing programs that involve exercise, travel, learning, and sports. These programs have a certain amount of risk associated with them. This form is to make you aware of those risks and to ask that you assume certain responsibilities for your decisions and actions and those of any minors in your custody or care (hereafter referred to as "my dependents").

FOR YOUR HEALTH

- I and my dependents understand we are engaging voluntarily in YMCA exercise, physical activity and/or program related activities and field trips.
- It is my responsibility to monitor my own condition and those of my dependents throughout any activity or program and, should any unusual symptoms occur, I and my dependents will cease participation and inform the instructor and/or staff of the symptoms.
- In the event that a medical clearance must be obtained prior to participation in a physical activity program, I and my dependents agree to consult a physician and obtain written permission from the physician prior to the commencement of any program. I and my dependents agree to assume the natural risks associated with exercise and physical activity.
- I give permission to any YMCA staff person to administer first aid in the event of an emergency and to secure 911 response units for any medical or surgical treatment needed for me and my dependents. I understand that staff will try to phone the emergency contacts, in my YMCA household record, but is not required to do so before action is taken. I understand and accept that primary accident insurance and any medical expenses incurred will be my responsibility.

FOR YOUR SECURITY

- I and my dependents understand the YMCA premises, especially parking lots and locker rooms are provided for members' and guests' convenience while participating in programs or using branch facilities. The YMCA is not responsible for vandalism, break-ins or thefts of personal property. I understand the YMCA recommends that valuables should not be brought to program activities or onto any premises. I agree to report any suspicious activity immediately to the YMCA. I understand that it is my responsibility to request, read, and after enrollment abide by the refund, cancellation and fee payment policies connected to specific membership and program involvement.

REGARDING YOUR CONDUCT

- I and my dependents will not bring weapons, controlled substances or alcohol on YMCA premises.
- I understand that any form of solicitation is prohibited and the use of violence, noise, force, coercion, sexual misconduct, threats, intimidation, unsafe conduct regarding children, fear, resistance, insults, or other conduct, intentionally or unintentionally causing disruption or preventing YMCA members' ability to enjoy their program activities, membership or YMCA staff's and/or volunteer's ability to conduct class or their job duties, is not acceptable behavior, is in conflict with YMCA values, and may result in my or my dependent's program withdrawal or membership termination of my membership. I am aware that the YMCA reserves the right, within its sole discretion, to withdraw program involvement and membership privileges to anyone for any reason that the YMCA, in its sole discretion, considers appropriate or in the interests of the YMCA and/or its patrons.

YOUR CONSENT AND RELEASE

- IN EXCHANGE FOR ALLOWING MY CHILD/WARD TO PARTICIPATE IN YMCA PROGRAMS AND SERVICES, I HEREBY AGREE TO RELEASE AND HOLD HARMLESS the YMCA, its employees, officers, directors and volunteers, from any loss, liability, claim of bodily injury or death or property damage, or costs which may arise due to my use of the YMCA's facilities and equipment and my participation in YMCA programs, including claims arising out of negligence of the YMCA and its employees and volunteers. The use of all YMCA facilities shall be undertaken at the undersigned's own risk. This agreement shall be governed by the laws of Georgia.
- I authorize the use and reproduction of any and all photographs or video footage of myself or my dependents for YMCA promotional purposes without compensation, and I understand that it is the personal responsibility of members and their guest(s) to avoid being photographed if they so desire. By signing this form, I agree that I have read this entire form and understand my responsibilities for participation and conduct in YMCA programs and activities.

Signature _____ Name (Please Print) _____ Date _____

Spouse/2nd Adult (if family membership) _____ Date _____

Name(s) of Child/Children _____

Parent/Guardian _____ Date _____

Emergency Contact/Relationship _____ Home Phone # _____ Cell Phone # _____