



Mansfield Community Center Member Agreement



Section 1 – Membership Description

Benefits of Membership: use of general admission facilities • gymnasium • lap pool • therapy pool • fitness center • indoor walking/jogging track • teen center • drop-in sports • discounted fees for fitness and aquatic programs • discounted rates for child care services and facility rentals • limited supply of guest passes • member rewards program • occasional free health workshops and special events • access to sitting room with internet access • complimentary tea and coffee every morning • free family fun events.

Membership Types

- **Individual:** This membership is for one person only, who must be age 14 or older. No additional members may be added.
- **Family/Household:** This is a membership for two people who reside in the same household.
 - Additional members (Age 18 and over): 50% off the individual rate
 - Additional members (Age 17 and under OR F/T student with proof under age 24): \$30/person
- **Adult/Child:** This is a two-person membership which must include one adult age 18 or older and one child under age 14 who reside in the same household.
 - Additional children (Under age 14 ONLY): \$30/child
 - Additional members age 14 and over may not be added to this membership.
- **Teen Center Membership:** This is a FREE membership for students in grades 6 – 12 only. Please fill out a Teen Center Membership registration form.

Membership Additions

- **Fitness Flex:** This flexible membership add-on provides an annual member with the ability to sign up for a session of classes or drop into 75 individual fitness classes. The fee for fitness flex is \$225, which is a 50% savings off the normal cost of fitness classes.

Section 2 – Membership Registration

New Membership (include \$25 enrollment fee) Renewal (no enrollment fee)

Referred by (New memberships only): newspaper advertisement website direct mailing seasonal brochure
 member (name: _____) other: _____

Membership Type: Family Adult/Child Individual **Membership Length:** 1 year 3 months

Membership Residency: Resident Ashford/Willington Resident Non-Resident **Fitness Flex:**

Primary Name on Membership (please print) _____

Birth Date ____/____/____ Phone (h) _____ (cell) _____

Address _____ Town _____ (Zip) _____

Employer _____ (w) _____

Email _____ Emergency Contact _____ Phone _____

Additional household members (that you would like to add to membership):

Name _____ Birth Date ____/____/____ Name _____ Birth Date ____/____/____

Name _____ Birth Date ____/____/____ Name _____ Birth Date ____/____/____

Name _____ Birth Date ____/____/____ Name _____ Birth Date ____/____/____

Payment: Cash Check (full) EFT (monthly plan) Credit Card (full) Credit Card (monthly plan)

Checks: *Make payable to "Town of Mansfield". For annual plan make check for full amount, for monthly plan include first month's fee plus the \$25 enrollment fee. A full year commitment is required for monthly plan.*

Credit Card: Card number _____ Exp ____/____/____ MC Visa Discover AmEx

After the year is fulfilled, memberships will become month-to-month, and you will be billed monthly until you submit a cancellation form to us at least 30 days prior to the billing cycle in which you'd like to cancel your membership.

In addition to membership fees, I wish to make a contribution to the scholarship fund in the amount of \$_____

Total amount to be charged to card \$_____ Cardholder's Name: _____

Electronic Fund Transfer (monthly payments): Routing # _____ Account # _____

Section 3 – Membership Terms

Automatic Renewal Option (for those paying in full): Upon the expiration of my membership, I elect to have my membership automatically renewed until I notify the Center otherwise ___ yes ___ no. Annual memberships that are paid monthly are automatically renewed as month-to-month memberships.

Term: The term of my membership is for ___ three (3) months OR ___ 12 months.

Cancellation: I understand that this Membership Agreement represents a contract between the Mansfield Community Center and me, and that I may cancel my Membership Agreement only in limited circumstances. I understand that if I wish to request a cancellation I need to submit a request in writing to the Center, and that the Center may not approve the cancellation. In the event that my request for cancellation is approved, I understand credits or refunds are not available retroactively and that I will be billed for the month in which the Center approves my cancellation. For members who pay monthly, I understand that after my contract is fulfilled, my membership will become month-to-month, and I will continue to be billed. I understand I can cancel my month-to-month membership at any time, and can do so by submitting a cancellation form to the Mansfield Community Center at least 30 days prior to the next billing cycle.

Additional Fees: The Center reserves the right to charge additional fees to your account for membership changes and transfers, membership freezes and insufficient funds. Please see our Fee Schedule for more details.

Complete Agreement: I understand that the Mansfield Community Center Member Guide and this Membership Agreement represent the complete understanding between the Mansfield Community Center and me. I further understand that no representations, written or oral, other than those contained in the Member Guide and this Membership Agreement are authorized or binding upon the Center.

Liability for Persons or Property: I give permission for any minor child named on my registration form to participate in activities at the Mansfield Community Center. I agree to supervise and to assume full control and responsibility for any persons or things at the Center by reason of my use of the facility, and I understand that the Center reserves the right to require that I remove from the facility any person in any way connected with me who, in the sole opinion of the Center, is creating a disturbance or is disrupting activities at the Center. I understand that participation in any activity at the Center or in any Center program on or off-site by my child or myself involves risk and I grant permission to the Center to utilize any medical emergency services it deems necessary to treat any injury that I or my child may incur. In consideration of being allowed to participate in Center activities, I assume all risks, including personal injury and fatality, which may arise from participation of myself or my minor child in such activities. I agree for myself, my family, heirs, executors and administrators to not sue and to release, indemnify and hold harmless the Town of Mansfield and the Mansfield Community Center and their affiliates, officers, directors, employees, volunteers, successors and assigns from any and all liability, claims, demands and causes of action whatsoever, that may arise from the participation of myself or my minor child in Community Center activities and its various programs on or off-site, whether it results from the negligence of any of the above named persons or entities or from any other cause. This release and indemnification agreement shall be as broad and inclusive as is permitted by the law of the State of Connecticut. If any portion of it is held invalid, the balance shall continue in full force and effect.

Fee Waiver Policy: Program and Center membership fee waivers are available to qualified applicants (Mansfield residents only). Check with the Parks & Recreation Office for fee waiver applications.

Membership Guide: Your Membership Guide describes the benefits of your membership, and details important policies, procedures and other items related to the Center. Please read your Membership Guide carefully.

Monthly Membership Billing: I authorize the Mansfield Community Center to bill my bank account or credit card monthly beginning ____/____/____ (MM/DD/YYYY) until such time as I notify the Center otherwise. I understand that my monthly membership fee in the amount of \$_____ may change upon my children reaching a new age bracket, automatic renewal or any other change in my membership. I also understand that after my one-year contract is fulfilled, my membership will become month-to-month, and I will be billed monthly until I submit a membership cancellation form to the Community Center at least 30 days prior to the next billing cycle.

Photo Release: I understand that for promotional purposes the Center videotapes and/or takes photographs of program participants and facility users. I hereby release and permit the Center to utilize for said promotional purposes any videotapes and/or photographs of my child or me engaged in facility activities and/or general facility use ____ MEMBER INITIALS.

Proof of Residency: Proof of residency is required for all new and returning members 18 years of age or older.

Suspension and Termination: I understand that the Center may suspend or terminate my membership without any liability for failure to adhere to the terms of this agreement or for violation of the Center's policies and procedures.

Acceptance of Terms: As a Member, I understand that I am entitled to use the Center facilities within the scope of the membership that I have selected and that I am obligated to pay my dues and fees regardless of whether I use the Center facilities. I agree to promptly update the Center of any changes of address, phone or credit information. On behalf of myself and my entire family, I certify that have received, read, understand and agree to all of the terms of this Membership Agreement and the Members Guide. **My child, age 14 and over, has signed below as a participant in the Community Center and its on and off-site activities indicates he or she has reviewed this document with my aid and supervision and agrees with all of its terms, and agrees to be legally bound by the same to the fullest extent permitted by law.**

_____ Member's Signature	_____ Date	_____ Mansfield Community Center Authorized signature	_____ Date
_____ Member's Signature	_____ Date	_____ Mansfield Community Center Authorized signature	_____ Date
_____ Member's Signature	_____ Date	_____ Mansfield Community Center Authorized signature	_____ Date
_____ Member's Signature	_____ Date	_____ Mansfield Community Center Authorized signature	_____ Date

RETURN THIS MEMBERSHIP AGREEMENT: Mail or bring one copy of this agreement to:
Mansfield Community Center, Membership Registration
10 South Eagleville Road, Mansfield, CT 06268

Upon receipt of this completed form, you will receive a receipt/confirmation of your membership, a membership packet and a bar-coded photo ID card. Your membership will be effective immediately.