



SHEBOYGAN COUNTY YMCA

2021 SUMMER MEMBERSHIP APPLICATION



<input checked="" type="checkbox"/> Membership Type	Age	Rate	Active Dates
Preschool	6 Months - Age 6	\$30.00	6/14/21 - 8/31/21
Grade School	Ages 7 - 14	\$40.00	6/14/21 - 8/31/21
High School	Grades 9 - 12, includes 2021 graduates	\$50.00	6/14/21 - 8/31/21
College	Ages 18 - 24, must present college ID	\$100.00	100 days from join date

**PLEASE PRINT CLEARLY.
AGE 18+ MUST PRESENT DRIVER'S LICENSE OR PHOTO ID.**

Full Legal Name _____ **Birth Date** _____ M F
Street Address _____ **City** _____
State _____ **Zip Code** _____ **Phone 1** _____ **Phone 2** _____
School _____ **Grade** _____ **Email** _____
Father's Name _____ **Phone #** _____
Mother's Name _____ **Phone #** _____

Do you have a medical condition/allergy we should be aware of? Yes No
 Condition or Allergy _____

In case of emergency, please contact:
Name _____ **Relationship** _____ **Phone #** _____

Has anyone listed on this application ever been convicted of a felony? Yes No
 If yes, please list name(s) _____

If this membership application is falsified in any way, we reserve the right to deny or cancel the membership. Membership fees are non-refundable. They may in most instances be transferred to another YMCA. I understand the Sheboygan County YMCA maintains insurance to cover its legal liability. It does not carry accident or health insurance to cover users in the instance of accident or injury.

Signature of Applicant or Parent _____ **Date** _____

When in the course of normal events or circumstances beyond our control, it is necessary to close sections of or the whole facility for cleaning, repairs, weather conditions or an emergency, a membership extension or refund is not granted.