



# GUEST REGISTRATION FORM

## GUEST POLICY:

YMCA Guests (non-members) must be accompanied by an adult member (18+). Adult guests must present a valid, state-issued, picture ID. Minors (under 18 years of age) must be accompanied by an adult member and have written parental consent. Adult member may sign the waiver assuming responsibility for the minor for the duration of their visit.

## GUEST INFORMATION

NAME: \_\_\_\_\_  
FIRST AND LAST

BIRTHDATE: \_\_\_\_\_  
MM-DD-YYYY

ADDRESS: \_\_\_\_\_  
STREET, CITY, STATE, & ZIP CODE

PRIMARY PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

PREFERRED EMAIL: \_\_\_\_\_

ACCOMPANIED BY: \_\_\_\_\_  
MEMBER'S FULL NAME

## EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT NAME: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

## YMCA AWAY MEMBERS

YOUR YMCA'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

MEMBERSHIP TYPE: \_\_\_\_\_

AWAY Members outside a 50 mile radius receive twenty (20) visits per calendar year.

AWAY Members within a 50 mile radius (with the exception of the Athens YMCA) receive three (3) visits per month.

## ADMINISTRATIVE USE ONLY

- Obtained a copy of ID
- Checked guest in RAPTOR
- Verified member accompanying guest
- Place an alert on the account regarding 1<sup>st</sup> visit in 2016
- Paid \$10 Guest Fee
- Verified AWAY Member's membership

Comments: \_\_\_\_\_

STAFF: \_\_\_\_\_



## YMCA OF GEORGIA'S PIEDMONT PARTICIPANT WAIVER

### PARTICIPANT WAIVER

As a participant in programs offered through the YMCA of Georgia's Piedmont for either myself or my child, the undersigned acknowledges and agrees to the following:

1. The YMCA is a Christian organization and that my child and I are expected to conduct ourselves in accordance with the teachings of Jesus Christ.
2. I give my permission to the YMCA of Georgia's Piedmont for the use of photos and slides that may be taken of my child or of myself and to use, without limitation or obligation, photographs, film footage, or tape recordings which may include either my image or voice or the image and voice of my child for purposes of promoting or interpreting YMCA programs.
3. I understand the YMCA of Georgia's Piedmont assumes no responsibility for injuries or illness which I or my child may sustain as a result of physical condition or resulting from participation in any athletic activities, sports programs, the use of any equipment, exercises, or other activities while on the property of or in conjunction with any activity held, coordinated or sponsored by the YMCA of Georgia's Piedmont. In consideration of the privilege of participation at the YMCA, I hereby voluntarily release and discharge the YMCA of Georgia's Piedmont, its officers, directors, employees, agents, and/or servants from any claims whatsoever, including for injury, illness, death, loss or damage which I or my child may suffer as a result of my/his/her participation these activities. I understand that no accident or medical insurance is provided with these activities. I fully indemnify and hold harmless the YMCA of Georgia's Piedmont, its officers, directors and employees from any and all claims.
4. I understand the YMCA of Georgia's Piedmont is not responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities, participating in YMCA activities, or on YMCA premises.
5. While the YMCA of Georgia's Piedmont will make every attempt to provide reasonable accommodations for mentally and physically challenged children and adults, the YMCA will not accept children or adults that are (a) of danger to themselves, (b) of danger to others, or (c) a disruption to the normal activities making it unreasonably difficult for other children or adults to enjoy YMCA programs and activities. Any of the above reasons will be grounds for dismissal from YMCA programs and activities. We strongly recommend that you discuss with YMCA of Georgia's Piedmont staff any special conditions or circumstances involving your child or an adult member in your household. We request that you do this PRIOR to registration so that we can advise you as to whether we can make a reasonable accommodation for your child or adult household member.

### ACCEPTANCE

I have read and voluntarily signed this **waiver and release** of liability and **indemnification** agreement, and further agree that no oral representation, statements or inducements apart from the foregoing written agreement have been made. I also accept the Conditions of Membership as well as the conditions imposed upon participants, both youth and adult, in activities and programs provided by the YMCA of Georgia's Piedmont.

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**PARTICIPANT SIGNATURE**

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**DATE**

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**SIGNATURE OF PARENT OR GUARDIAN  
(If participant is under the age of 18)**

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**DATE**