

# 3C's Membership Application

## Huxley Parks and Recreation

515 N Main Ave.

Huxley, IA 50124

(515) 597-2515

[www.huxleyiowa.org](http://www.huxleyiowa.org)



### Office Use:

Membership Number: \_\_\_\_\_

Barcode Number: \_\_\_\_\_

Membership Packet:

Orientation:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Gender: \_\_\_\_\_

Email: \_\_\_\_\_

Spouse: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Dependents:

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Medical Conditions (if any): \_\_\_\_\_

### Membership Plan:

Family

Couple

Adult

Student

Sr. Couple

Sr. Single

Walking

Weight Room

College Summer/Winter

### Resident Status:

Huxley Resident

Non-Resident

### Billing Option:

Annual

Semi-Annual

Quarterly (select plans)

ACH

### Contract Start: \_\_\_\_\_

### Contract End: \_\_\_\_\_

Membership Fee: \_\_\_\_\_

Pro-Rated Amount for \_\_\_\_\_: \_\_\_\_\_

Total Due: \_\_\_\_\_

ACH (auto-withdrawals) are processed on the 20th of each month.

ACH Amount/Month: \_\_\_\_\_

Bank account authorization form and a voided check are required to sign up for automatic withdrawals. A \$2.00/month convenience charge is added to ACH contracts.

**Notice to Buyer:** Do not sign this contract if it contains blank spaces or if you do not understand the terms. By signing this application I indicate that I have read the reverse and fully agree to the terms and conditions of this application.

Signature: \_\_\_\_\_

Co-Sign: \_\_\_\_\_

Date: \_\_\_\_\_

(guardian if member under 18)

Department Rep: \_\_\_\_\_

Director P&R: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ **Initial each of the following lines to signify you have read and understood the terms**

\_\_\_\_\_ **Liability for use of facility**

Member assumes the risk of physical activity with his/her own physical condition and acknowledges that he/she has received advice from his/her doctor that he/she is capable of physical activity such as that provided or that he/she will seek advice or that he/she assumes the risk of proceeding without such notice. Member further acknowledges that he/she has been informed that if he/she has a history of heart disease that he/she should consult a physician before proceeding with this agreement. Member does hereby waive, release, and forever discharge Huxley Parks & Recreation Department, its employees and independent contractors, the City of Huxley, and all others from any and all responsibilities or liability for injuries, illnesses, damages resulting from participation, or loss of personal property in any department activities or use of equipment whether indoors, outdoors, supervised, or unsupervised.

\_\_\_\_\_ **Rules and regulations**

Member acknowledges that they have a copy of the Rules and Regulations of Huxley Parks & Recreation Department governing the rules and regulations of the use of Citizens Community Center.

\_\_\_\_\_ **Late fee and rejoining fee**

All monthly installments are due and payable on the 20th of each month unless prepaid. Member agrees that if the full monthly installment is not received within 10 days of the due date, to pay a late fee of \$5.00. A re-joining fee of \$60.00 will be applied to any person or entity whose account was cancelled due to delinquent payments and is now reapplying for a new membership.

\_\_\_\_\_ **Termination of Agreement**

1. Evidence of Total or Permanent Disability or Death of Member: Should Member become totally or permanently disabled or die during the term of this agreement as evidenced by letter from his physician of such disabilities which would preclude the use of Huxley Parks & Recreation Department facilities, or a certification of death, this agreement will be terminated as of the date of such disability or death.
2. Relocation of Member: Should Member move his residence during term of this agreement to an area outside of a thirty-five mile radius of Huxley Parks & Recreation Department he/she may terminate this agreement not earlier than 30 days in advance of relocation without penalty provided he/she has made all previous installments and provides written proof in advance of such relocation.
3. Default in Payment of Monthly Electronic Installments: Failure to pay any monthly installments within 10 days of its due date shall render, at the option of Huxley Parks & Recreation Department, the entire balance due and payable immediately without further notice of demand. Huxley Parks & Recreation Department shall be entitled to all costs of collection, including reasonable attorney's fees and late fees, in the event of any default hereunder. Waiver of any default of Member's obligations under this agreement shall not be deemed a waiver of any other default.
4. This agreement is governed by the laws of the State of Iowa. Huxley Parks & Recreation Department makes no warranties or guarantees as to use of facilities. This agreement represents the entire agreement between parties.

\_\_\_\_\_ **Buyer's right to cancel**

**Today's Date:** \_\_\_\_\_

Buyer may cancel this transaction within three business days from the above date. If you cancel, any payments made by you under the contract, less \$20.00, and any negotiable instrument executed by you will be returned within forty-five days following receipt by the seller of your cancellation notice, and any security interest arising out of the transaction will be cancelled. After you cancel, the department may request the return of all contracts, membership cards, and other documents or evidence of membership. To cancel this transaction, send, or deliver a signed and dated copy of the cancellation notice by certified or registered mail to Huxley Parks & Recreation Department at 515 N. Main Ave., Huxley IA 50124 not later than midnight of \_\_\_\_\_ (date).

I hereby cancel this transaction. Signature: \_\_\_\_\_

Date: \_\_\_\_\_