



Stamford JCC Membership Application

William & Sally Tandet Building • 1035 Newfield Ave • Stamford, CT 06905 • stamfordjcc.org • tel (203)322-7900 • fax (203)329-7546

APPLICANT 1

MEMBER # _____

SCAN CODE _____

Mr. Mrs. Ms. Dr. Other _____ Marital Status Married Single

First Name _____ Last Name _____

Address _____ City/State/Zip _____

Home Phone _____ Cell Phone _____

E-Mail Address _____ Date of Birth _____

Religion (optional) _____ Congregation Affiliation _____

Employer _____ Occupation _____

Business Address _____ City/State/Zip _____

Does your employer match donations yes no

APPLICANT 2 (Spouse or Co-Applicant)

MEMBER # _____

SCAN CODE _____

Mr. Mrs. Ms. Dr. Other _____ Marital Status Married Single

First Name _____ Last Name _____

Cell Phone _____ Date of Birth _____

E-Mail Address _____

Religion (optional) _____ Congregation Affiliation _____

Employer _____ Occupation _____

Business Address _____ City/State/Zip _____

Does your employer match donations yes no

CHILDREN (Ages 21 & younger)

Name	Sex	Date of Birth	E-Mail	Scan Code
_____	M <input type="checkbox"/> F <input type="checkbox"/>	_____	_____	_____
_____	M <input type="checkbox"/> F <input type="checkbox"/>	_____	_____	_____
_____	M <input type="checkbox"/> F <input type="checkbox"/>	_____	_____	_____
_____	M <input type="checkbox"/> F <input type="checkbox"/>	_____	_____	_____

Interests:

- Fitness Center
- Group Fitness
- Aquatics
- Team Sports/ Leagues
- Athletics
- Early Childhood
- Childcare
- Youth Programs
- Family Programs
- Teen Programs
- Adult Programs
- Senior Programs
- Israel/Judaic Programs
- Volunteering
- Other _____

I/We heard about the JCC through:

- Friend/Family Member Name _____
- JCC Website
- Social Media
- Recently moved to the neighborhood from _____
- Community Usage
- Live nearby / drive by
- Promotion/Advertisement
- I/We were JCC Members Where? _____ When? _____
- Realtor Name/Agency _____
- Other _____

IMPORTANT INFORMATION Please read carefully and initial indicating your understanding.

I agree to abide by the policies, rules and regulations of the Center, as amended from time to time by the JCC and to behave with appropriate conduct which would include but is not limited to damage or destruction of JCC property, theft, follow proper safety precautions and practices, appropriate behavior, no fighting, no harassment (including physical and verbal abuse) of other participants and staff. **Please initial** _____

The CEO, at his/her discretion, may suspend, cancel or revoke a membership at any time for any reason. **Please initial** _____

Membership is for an initial 12 month period. Memberships to the JCC being paid monthly will be charged a \$100 early termination fee for cancelling within the first 12 months, and require written notice a minimum of 30 days before cancellation takes effect. Registrations that received pricing at the member rate will be charged the prorated difference in price between the member and community rate. There are no refunds for memberships paid in full. The JCC may adjust the monthly rates no more than once in any 12 month period. **Please initial** _____

If I wish to terminate after a minimum of 12 months, or change my membership in any way, I agree to give the JCC a minimum of 30 days written notice. Membership is not transferable or refundable. **Please initial** _____

I will carry my membership card with me when visiting the Center. I agree to pay a \$5 replacement fee if card is lost or damaged. **Please initial** _____

I hereby give permission for my child(ren) to participate in all JCC activities. In the event that I cannot be reached, I hereby give permission to the JCC to act on my behalf to have medical treatment administered to my child(ren) in the event of an emergency. I understand that I will be fully and directly responsible for the cost of medical attention. **Please initial** _____

I hereby grant, by participating in a Stamford Jewish Community Center (the "JCC") program, the JCC and its legal representatives the irrevocable right and unrestricted permission to use and publish photographs or video images of me and/or my children, or in which we may be included, for any purpose authorized by the JCC, including but not limited to: website use, social media, editorial publications, catalog and advertising use. This grant includes the right to modify and retouch he images in the discretion of the JCC. I understand that the circulation of such materials could be worldwide and that there will be no compensation to me for this use. Furthermore, I understand that I will not be given the opportunity to inspect or approve the finished products or the advertising copy or the printed matter that may be used in connection therewith. In granting this permission to the JCC and its legal representatives, I am fully and without limitation releasing it from any liability that may arise from the use of the images. I understand that if I do NOT want my name or image, or that of my child or family member, to be published I must submit a written letter to the JCC stating this, along with a photo or photos of the individual(s) concerned. **Please initial** _____

In consideration of being permitted to participate in JCC activities and to use the facilities and equipment, I accept all risks to my (and my family's) health including but not limited to risk of injury or death, that my result from such participation, and I hereby release the JCC, its Board of Directors, officers, employees and representatives from any and all liability for any and all claims and causes for action from loss or damage to me and/or my family's property and for any and all injury to my person (or to my family member), including death that may result from or occur during participation in a JCC activity. I further agree to indemnify and hold the JCC its Board of Directors, officers, employees and representatives harmless from liability for the injury or death of any person(s) and damage to property that may result from my (or my family's) negligence, intentional acts or omissions, arising from my JCC membership or participation in any JCC activities. **Please initial** _____

Signature _____ Date _____

Signature _____ Date _____

Parent/Guardian signature for Memberships under 18 years old.

Caregiver (other than parents)

Name: _____

Emergency Contact

Name: _____

Phone Number: _____

Executive Locker Rooms - XLR

(Ages 18 +)

Categories			Monthly Fees
Individual (age 18 +)	<input type="checkbox"/> M	<input type="checkbox"/> F	<input type="checkbox"/> \$45
Couple			<input type="checkbox"/> \$65

MEMBERSHIP

Membership Fees are good through June 28, 2021. Annual prices available upon request.

Membership Categories	Registration Fees	Monthly dues
Family	<input type="checkbox"/> \$100	<input type="checkbox"/> \$120
Single Parent Family	<input type="checkbox"/> \$75	<input type="checkbox"/> \$81
Couple	<input type="checkbox"/> \$100	<input type="checkbox"/> \$110
Senior Couple (age 72+)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$72
Young Adult (under age 30)	<input type="checkbox"/> \$50	<input type="checkbox"/> \$48
Individual Adult	<input type="checkbox"/> \$75	<input type="checkbox"/> \$70
Senior Individual (age 72 +)	<input type="checkbox"/> \$50	<input type="checkbox"/> \$45
Teen (age 13 - high school)	<input type="checkbox"/> \$50	<input type="checkbox"/> \$38
College Student School Name _____	<input type="checkbox"/> \$50	<input type="checkbox"/> \$38
Corporate Company Name _____	<input type="checkbox"/> \$75	<input type="checkbox"/> \$68
Live-In Caregiver (available only with family or single parent family memberships)		<input type="checkbox"/> \$25

TOTALS - For Office Use Only

Registration Fee	\$
Monthly dues	\$
XLR	\$
Discount	\$
TOTAL DUE	\$
Date	

Notes

