

Health Club Membership Registration

Enrollment Date:	_//		
Adult #1:	(Age)		
Email Address:			
Emergency Contact:Phone: ()			
Check Membership 1	Гуре		
One Month:	••	Six Month:	Senior (65+)
o Single \$65.00	\$55.00	o Single \$260.00	
o Couple \$90.00	\$80.00	o Couple \$340.00	
o Family \$150.00 (A	dditional person \$10.00)	o Family \$550.00	•
Three Month: Senior (65+)		(up to 5 related family memb	ers)
o Single \$150.00	\$140.00		
o Couple \$190.00	\$180.00		
o Family \$325.00 (u)	n to 5 related family members)		

Family memberships are based on two adults and up to three related children.

Additional children may be added for \$25 each. No group discounts permitted.

Pool & Fitness Hours of Operation follow the hours of the Main Office.

November 1st through late-May Sun – Thurs 8AM to 8PM, Fri & Sat 8AM to 10PM

Closed Thanksgiving and Christmas day

Closed Thanksgiving and Christmas day
Signature: ________

By signing the above, I agree that I have received, read, and understood the Rules & Regulations and assume all responsibility for the use of equipment and space. Furthermore, as a member I understand that all use included as part of this membership is at my own risk. The pool house is not continuously monitored by staff and no lifeguard services are offered as part of this membership.

To be filled in by Village by The Sea Staff:

Method of Payment: Cash or Check #_____(Circle One & Include Check Number)