

# UT Auxiliary Enterprises Recreation Center

## Non-Member GUEST Punch CARD

Please PRINT clearly, including name as it is to appear on the GUEST punch card(s).

Name of Guest: (first) \_\_\_\_\_ (last) \_\_\_\_\_

Work Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender (check) Male \_\_\_\_ Female \_\_\_\_

Email address: \_\_\_\_\_ (to receive facility & program related emails only)

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

I am a Guest of: (Check as applicable) SELF \_\_\_\_ How affiliated: \_\_\_\_\_

Guest of an eligible Rec Center member \_\_\_\_\_

Name of Member or Eligible Individual you are a guest of: \_\_\_\_\_

You must specify the name of the Person, the institution, Department or School where you or they work or currently attend; or specify if UTHSC-H or UT System Alumni (school/year), and show proof how you are affiliated as a guest.

Rank the top 3 areas of the facility you plan to use:

Rank 1-3, with 1 being the main reason and or area of use:

Weight Room \_\_\_\_\_ Cardio Exercise Equipment area \_\_\_\_\_ Swimming Pool \_\_\_\_\_  
Outdoor Basketball Courts \_\_\_\_\_ Outdoor Tennis Courts \_\_\_\_\_ Racquetball Court \_\_\_\_\_  
Group Fitness Room \_\_\_\_\_ Leisure Game area \_\_\_\_\_ Programs available \_\_\_\_\_

How did you hear about the facility? friend / family \_\_\_\_ Co-worker \_\_\_\_ email \_\_\_\_ Internet/website \_\_\_\_  
flyer/sign \_\_\_\_ Coupon/Gift Certificate \_\_\_\_ Guest Pass/Fair \_\_\_\_ Orientation \_\_\_\_ Former Member \_\_\_\_  
TMC News \_\_\_\_ Newsletter (specify) \_\_\_\_\_ Other (specify): \_\_\_\_\_

Referred By (full name): \_\_\_\_\_

### Children and Age Policy:

**AGE POLICY:** Children under the age of 16 must be accompanied and supervised by a parent or guardian at all times while in the facility. No one under 16 is allowed in the weight room or cardiovascular exercise area. Also, no one under 16 is allowed in the swimming pool or pool deck area during the winter months, or at anytime when the pool blankets are on the pool.

If a guest is less than 18 years of age, a parent or legal guardian must co-sign this Guest Agreement. Children five years of age and younger will be admitted free of charge.

**NOTE / REMINDER: At the time of initial guest purchase and UPON EACH RENEWAL YOU MUST PRESENT a valid ID and show proof of how you are eligible to purchase guest privileges.**

If you are purchasing through an eligible member, you must either come with the member the first time or bring a copy of their university ID and a written notice from them indicating you are allowed to be their guest.

**UT ALUMNI PROOF OF ELIGIBILITY IS required at time of initial purchase only.**

**Waiver of Responsibility and Assumption of Risk**

Guest recognizes that participation in athletic/fitness-related activities includes the possibility of injury. By my signature, I hereby voluntarily assume all risk and I waive, on behalf of myself and my heirs and to the extent allowable under law, any claims or damages against The University of Texas System, The UT Health Science Center at Houston, or their respective employees, agents, officers, Regents or representatives for any injury or illness that may directly or indirectly result from my membership or participation at the UTHSC-H Recreation Center. I certify my participation is completely voluntary.

All members and guests are encouraged to obtain a physical examination from a doctor before using any exercise equipment or participating in any exercise class. All exercises, including the use of weights and use of any and all machinery, equipment and apparatus designed for exercising shall be at the member's /guest's sole risk.

*Upon acceptance of this application by UTHSC-H Recreation Center, I hereby agree and accept guest privileges, agree and accept the Waiver of Responsibility and Assumption of Risk listed herein, and agree to abide by the rules and regulations which I can obtain a copy if so desire or view on the web site. I acknowledge and understand that the rules and regulations are subject to change without notice.*

Guest's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian's Signature for Minor \_\_\_\_\_ Date \_\_\_\_\_

*Children age 18-20 must complete a separate application*

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**FOR OFFICE / STAFF USE ONLY:**

**Guest Card #** \_\_\_\_\_ **(Circle type) 5 or 10 Punch Card**      **Guest #** \_\_\_\_\_

Sold by: \_\_\_\_\_ Proof of Eligibility reviewed and attached: \_\_\_\_\_ Date: \_\_\_\_\_