

UT Auxiliary Enterprises Recreation Center Membership APPLICATION

Please PRINT clearly, including names as they are to appear on the membership card(s).

Name of Member joining: (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: _____

Rank the top 3 areas of the facility you plan to use and why you joined this facility:

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 _____

Specify the name of the institution, Department or School where you work or currently attend; or specify if UTHSC-H or UT System Alumni (school/year): _____

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): _____

Spouse Name (if on Joint Membership): (first) _____ (last) _____

Birthdate ____ / ____ / ____ Gender (check) Male ____ Female ____

Children to be on Membership (if Family Package – Family package covers ages 6-20). Please read below.

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 applicant is less than 18 years of age, a parent or legal guardian must co-sign this Membership Agreement. Children five years of age and younger will be admitted free of charge. "Family Member" includes spouse and/or all those who are claimed as dependents up to the age of 20. Once turning 21, children must apply for their own membership if they meet the eligibility requirements.

Name _____ Birthdate ____ / ____ / ____ Male ____ Female ____

Name _____ Birthdate ____ / ____ / ____ Male ____ Female ____

Name _____ Birthdate ____ / ____ / ____ Male ____ Female ____

Waiver of Responsibility and Assumption of Risk

Members recognize 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 membership, 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.

Member's Signature _____ Date _____

Spouse's Signature _____ Date _____

Parent or Guardian's Signature for Minor members' _____ Date _____

Children age 18-20 must complete a separate application if becoming a member.

NOTE / REMINDER: At the time of initial membership purchase and UPON EACH RENEWAL YOU MUST PRESENT a valid university ID from your place of employment. If you are a spouse of a student or employee, you must either come with the member and or bring a copy of their university ID.

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

FOR OFFICE / STAFF USE ONLY:

Classification: Employee _____ Faculty _____ Resident _____ Student _____ Spouse /family _____
UTHSC-H Alumni _____ UT System Alumni _____ (Alumni School/Year _____)
UTHSC-H Extended Family _____
MDA _____ MHHS _____ HCHD _____
AFFILIATE _____
TMC Student _____ TMC _____ TMC Community _____ Other _____

Institution: _____

Expiration Date Issued: _____ RC Membership # _____

Sold by: _____ Proof of Eligibility reviewed and attached: _____ Date: _____