

For Staff Use Only:	
Enrollment Date:	_____
Membership Type:	_____
Payment Plan:	Monthly or Annually
Paid: Y / N	Amount: _____

# Wellness Center Membership Enrollment Form

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Ph # \_\_\_\_\_ Work Ph # \_\_\_\_\_

Cell Ph # \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

## Medical/Emergency Information

Primary Emergency Contact \_\_\_\_\_

Relation \_\_\_\_\_ Home Ph # \_\_\_\_\_

Work Ph # \_\_\_\_\_ Cell/Pager # \_\_\_\_\_

Primary Physician \_\_\_\_\_

Phone # \_\_\_\_\_

Secondary Physician (if applicable)

\_\_\_\_\_

Phone # \_\_\_\_\_

# Medical Waiver/Informed Consent

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

\_\_\_\_\_  
(Initials) I have consulted with my regular physician and am able to participate in an unsupervised, self-paced exercise program. My physician has informed me of any restrictions or limitations to participating in such an exercise program and these restrictions or limitations are my sole responsibility. I am aware of any medical condition which would prevent or limit my participation in an unsupervised, self-paced exercise program and I will adjust my exercise program accordingly.

\_\_\_\_\_  
(Initials) I have read and understand the 26 Wellness Center Policies and Guidelines Manual and agree to follow the guidelines stated therein.

\_\_\_\_\_  
(Initials) I understand I am committing to one full year of membership, which can be paid out monthly, or annually. If I choose to pay out monthly my bill will reflect the entire year commitment and I will maintain my account or risk deactivation of the account. I understand I am free to cancel my membership account, with written notice, at anytime without penalty (see policies and guidelines for more information).

## **HOLD HARMLESS and INDEMNITY AGREEMENT**

In consideration of North Richland Hills Baptist Church (NRHBC) and The 26 Wellness Center (WC) allowing the use of its property for the following activity:

The undersigned participant hereby releases Owner and their agents from any and all liability, claim, and cause of action which may arise by reason of the Participant using the Premises and/or reason of damage to equipment or property of the Participant, or any third party, situated or placed upon the Premises by the Participant or any third party, or by reason of injury to person working with the Participant, its employees, agents, invites, licensees or visitors, or to any other person, or for any injury to a person or damage to property on or about the Premises. The Participant agrees to indemnify and hold NRHBC, WC, and its agents harmless of and from any loss, attorney's fees, damages, expenses or any claims arising out of any such damages or injuries, resulting from the negligence or wrongful act of the Participant, its employees, agents, invites, licensees or visitors.

Furthermore, the Participant agrees to the following conditions:

1. The Participant agrees to leave the Premises in good clean condition.
2. The Participant agrees not to interfere with any employees, members, agents, invites or visitors that may access the building or property.

EXECUTED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Participant:

BY: \_\_\_\_\_  
Signature of Participant/Guardian

\_\_\_\_\_  
Printed Name of Participant/Guardian