



Membership Application

Name _____ Phone _____

Address _____ City _____ Zip Code _____

(Adult) Email _____ Age* _____ Birthdate _____

Emergency Contact Name _____ Phone _____

* Applicants under the age of 18 must have parent signatures before applying for membership.

Proof of residency required.

Please note that not all Roselle addresses are "in-district." If your address is not "in-district" you will be charged the non-resident rate.

Membership Type	
Family Annual Membership (Ages 16+)	
The Family Annual Membership is for up to 6 family members who live in the same household. Nobody residing at a different primary residence and no child under the age of 16 or over the age of 25 can be on a family membership. <input type="checkbox"/> RES \$375 <input type="checkbox"/> NR \$390 Special Rate: _____	Check for Special Rate <input type="checkbox"/>
Adult Annual Membership (Ages 18-54)	
The Adult Annual Membership is a 12-month membership available to participants between the ages of 18 and 54. Members have full access to the fitness center during regular hours and access to open gym when available. <input type="checkbox"/> RES \$195 <input type="checkbox"/> NR \$210 Special Rate: _____	Check for Special Rate <input type="checkbox"/>
Senior Annual Membership (Ages 55+)	
The Senior Annual Membership is a 12-month membership available to participants over the age of 55. Members have full access to the fitness center during regular hours and access to open gym when available. <input type="checkbox"/> RES \$155 <input type="checkbox"/> NR \$170 Special Rate: _____	Check for Special Rate <input type="checkbox"/>
Student Annual Membership (Ages 16-17)	
The Youth Annual Membership is a 12-month membership available to participants between the ages of 16 and 17. Members have full access to the fitness center during limited weekday hours, M-F 1:00-7:00pm and regular weekend hours. <input type="checkbox"/> RES \$100 <input type="checkbox"/> NR \$115	
Monthly Membership (Ages 18+)	
The Monthly Membership is a 1-month membership available to participants 18 years and older. Members have full access to the fitness center during regular hours and access to open gym when available if over the age of 18. <input type="checkbox"/> RES \$35 <input type="checkbox"/> NR \$45	
Daily Fees per Visit (Ages 16+)	
All daily fee users must be 14 years or older and sign a waiver for each visit. Users under the age of 18 must have waiver signed by a guardian. Daily fees are paid in the Fitness Center. <input type="checkbox"/> RES \$8 <input type="checkbox"/> NR \$12	
Silver Sneakers/Tivity Health or Renew Active/One Pass Membership	
<input type="checkbox"/> Silver Sneakers/Tivity Health # _____	
<input type="checkbox"/> Renew Active/One Pass # _____	

Fitness Center Rules and Regulations

- All members must present their ID card in order to use the Fitness Center. Members must also present their ID card when participating in Open gym or for checking out a basketball. If you forget your ID excessively in the Fitness Center, you will be charged \$5 for a new ID. If you fail to bring your ID to Open Gym you will pay the Open Gym fee.
- Gym bags and street clothes are not allowed in the Fitness Center. Please use the locker rooms on the lower level.
- Do not wear dirty or wet shoes into the Fitness Center.
- Closed-toe athletic shoes and shirts must be worn at all times. Please wear comfortable, non-restrictive clothing.
- If there are members waiting to use the Cybex or free weight equipment, please rotate them into your workout.
- Children under the age of 14 are not allowed in the Fitness Center.
- No smoking, eating, or drinking is allowed in the Fitness Center, with the exception of water.
- On each machine is an explanation of proper use. Should you need assistance, please ask the Fitness Attendant.
- The Fitness Center Staff may restrict participation in the Fitness Center for medical or safety reasons.
- Please report any malfunctioning equipment to the Fitness Staff immediately. Every effort will be made to get the equipment functioning as soon as possible.
- Members must show respect to staff, other members and equipment at all times.
- Roselle Park District is not responsible for lost or stolen property.
- Please do not talk on cell phones in the fitness center. If you must make or receive a call, please take your phone to the lobby area.
- Please do not leave treadmills running while not on the equipment. This poses a safety hazard to other members.
- Please wipe down equipment with anti-bacterial towelettes after finished using equipment.
- Members under the age of 18 will not have access to use of CRC gym.

Roselle Park District – Waiver and Release

Please recognize that individuals with coronary risk factors or other medically significant risk factors, run a greater chance of cardiovascular incident or increased risk of injury during physical activity. Although you are solely responsible for determining if you are physically fit for any and all fitness activities, it is always advisable, especially if you are pregnant, suffer from an underlying medical condition, take medication, smoke cigarettes, have a family history of coronary disease, or have recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

I hereby apply for membership to the Roselle Park District Fitness Center, and agree to abide by the policies, rules and regulations as stipulated by supervisory staff and the Park District Board. By purchasing a Fitness Membership, I realize the inherent risks involved in the programs and appreciate the nature of the risks. The applicant(s) hold harmless the Roselle Park District for any damages caused by participation in this program. Individuals registered for a fitness membership are encouraged to seek a physician's approval. I also understand that my membership is **non- refundable** and **non-transferable** except in the event of a medical disability. **I have read and received a copy of the facility rules.** I realize and accept that this pass is issued at the discretion of the Roselle Park District and may be recalled or revoked in their discretion at any time. I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants, and employees from any and all claims resulting from injuries, damages and losses sustained by me, and arising out, connected with, or in any way associated with the use of the equipment and facility.

I understand that I am expected to follow all District policies and regulations including covid-19 related guidelines while participating in District programs or using District facilities including but not limited to, wearing a mask when inside any Park District facility and keeping a 6-foot minimum distance between individuals who are not members of your household. A complete listing of the covid-19 guidelines can be found at rparks.org

Member Signature

Date

Parent or Guardian Signature (if applicable)

Date

For Office Use Only:

Date Application Received: _____

Amount Paid _____

Receipt # _____

Processed By _____

Membership Barcode # _____

Expiration Date _____

Silver Sneakers/Tivity Health # _____

Renew Active/One Pass # _____

☐ Photo Taken

☐ Verified Proof of Residency

☐ Forms Completed/Signed