

Deposit School District Fitness Center Membership Agreement Form

We want all members to benefit from the rewards of strength and cardio training. Before you start a program, please read and sign the Deposit School Fitness Center rules and sign the member agreement.

Please note: If school is canceled or not in session, then the Fitness Center will also be closed.

Rules include:

- 1) No food or drink in the fitness center, except water in sealed-top water bottles.
- 2) Bags, coats, etc. are permitted in a designated area near the fitness center.
- 3) Appropriate workout clothing must be worn; shirt (covering full chest and back), shorts, athletic pants and athletic shoes
- 4) Safety First! If you are unsure on how to use the equipment, please ask the staff for help.
- 5) When the fitness center is crowded, please limit your time on the cardio equipment to 20 minutes.
- 6) Be courteous to the next person using the machine and sanitize it after you finish.
- 7) For your own comfort, it is recommended to bring a small towel from home for your personal use.
- 8) Make sure you check in and out each time you use the Fitness Center.
- 9) Please remember, it is always best to check with your physician before starting any fitness program.
- 10) Before using any of the workout machines, make sure to go through the orientation from one of the Fitness Center staff members.
- 11) Students must be in 6th grade or higher for membership to the Fitness Center.
- 12) Children younger than 6th grade are not allowed in the Fitness Center. Childcare is not provided and children are not allowed to be unsupervised in the school building.

We want all members to enjoy their workouts. We have zero tolerance for any “horseplay” or misuse of the equipment. It is at the discretion of the supervising person on duty and if they see you misusing the equipment, you will be asked to leave.

FITNESS CENTER MEMBER AGREEMENT

I have read and understand the rules for the usage of the Deposit School Fitness Center. I understand if I violate any of the rules, my membership privileges may be revoked. I am also financially responsible for any damages that occur from the misuse of the equipment.

Member’s Name (print) _____ (signature) _____

Phone(s) _____ Email Address _____

Fitness Center Staff Initials _____ Date _____

For Office Use Only: 2017	<input type="checkbox"/> Student/Senior Citizen(62+)	<input type="checkbox"/> Community Member	<input type="checkbox"/> Non Resident
Membership Fees	\$1/Day	\$2/Day	\$4/Day
Make checks payable to	\$2.50/Week	\$5/Week	\$10/Week
“Deposit Central Schools”	\$7.50/Month	\$15/Month	\$30/Month
	\$37.50/6 Mos.	\$75/6 Mos.	\$150/6 Mos.
	\$62.50/Year	\$125/Year	\$250/Year