



FRIEDBERG JCC
SILVER SNEAKERS/PRIME/RENEW ACTIVE

15 Neil Court
 Oceanside, NY 11572
 516-766-4341
 Fax: 516-766-0513
 www.friedbergjcc.org

Please complete application in full and sign below. Please print clearly.

Silver Sneaker/Prime/Renew Active Confirmation Code: _____

Last Name: _____ First: _____ M.I.: _____ Date: _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Telephone #: _____ Cell #: _____

E-mail Address: _____

Date of Birth: _____

Marital Status: Single: _____ Married: _____ Divorced: _____ Separated: _____ Widow/er: _____

Emergency Name/Phone #: _____

Reason for Joining: H&F _____ Pool _____ Gym _____ Sr. Programs _____ Other _____

How did you hear about the JCC? Mailing _____ Dr. or Insurance _____ Live in Area _____

Previous Member _____ Programs _____ Website _____ Ads _____

Referred by: _____ Phone #: _____

PARTICIPATION TYPE		
	Basic	J-Fit
Renew Active (Optum)	<input type="checkbox"/>	<input type="checkbox"/>
Silver Sneakers	<input type="checkbox"/>	<input type="checkbox"/>
Prime	<input type="checkbox"/>	<input type="checkbox"/>
Sr. Adult Club (Ages 65+)	<input type="checkbox"/>	<input type="checkbox"/>
Sr. Adult Club (Couple) (Ages 65+)	<input type="checkbox"/>	<input type="checkbox"/>

PHONE FOLLOW UP	
7 days: _____	30 days: _____
FITNESS ORIENTATION	
Date: _____	Time: _____
Notes: _____	

Optional

Religion: Jewish: _____ Other: Synagogue Affiliation (if applicable): _____

Occupation: _____

Business Name/Phone #: _____

Spouse's Occupation: _____

Spouse's Business Name/Phone #: _____

I hereby apply agree to abide by the rules and regulations of the Friedberg JCC. All payments are non-refundable. I understand that this is a continuous plan. If I wish to terminate my J-Fit payment, I must give the JCC a 30-day written notice. INITIAL: _____

Photo release: We hereby consent and agree that all the applicants shall participate in all Agency activities including, but not limited to exhibits, performances, television, video, internet and radio in each case without compensation, and the Agency and UJA-Federation of New York, with which the agency is affiliated, may photograph, videotape or record the applicant and may at any time use such person's photograph, videotape, recording and/or name in furtherance of the Agency's charitable purposes, without the applicant being compensated.

Signature: _____ Date: _____

Method of Payment: MC: _____ Visa: _____ Disc: _____ Amex: _____ Cash: _____ Check#: _____

Amount: \$ _____

Staff: Print Name _____ Signature: _____



FRIEDBERG JCC AUTOMATIC PAYMENT PLAN FORM

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What is the JCC Automatic Payment Plan?

This program provides a way to budget your continuous JCC membership fee on a monthly basis. With your authorization, these fees will be deducted from your checking account or credit card.

Authorization Agreement

I hereby authorize the Barry and Florence Friedberg JCC, hereinafter called the JCC, to initiate electronic entries to my checking account or credit card as indicated below:

Initial Payment: _____ Mos. Payment: _____ Annually in Full: _____
Club Membership: _____ JFIT Upgrade: _____ Basic: _____
(No Charge)

CHECKING ACCOUNT

FINANCIAL INSTITUTION: _____
CITY/STATE/ZIP: _____
ROUTING/TRANSIT NUMBER: _____
ACCOUNT NUMBER: _____

CREDIT/DEBIT CARD

Mastercard Visa Discover Amex
Initial Payment: _____ Mos. Payment: _____ Annually in Full: _____
ACCOUNT NUMBER: _____
SECURITY CODE (ON BACK OF CARD): _____
EXPIRATION DATE: _____

This authorization remains in effect until the JCC has received a 30-day written notification from me indicating my desire to discontinue my membership after a minimum of 12 months.

NAME: _____
ADDRESS: _____
CITY/STATE/ZIP: _____

OFFICE USE ONLY
Membership: _____
Join/Renewal Date: _____
First Draft Date, 10th Day of: _____
Amount: _____

Who is eligible for the plan?

Any adult (age 18 and over) who has a checking account at a participating financial institution or a major credit card. Teen memberships must be authorized by a parent or legal guardian.

How do I sign up?

By completing this authorization form and returning it along with a voided check (if using your checking account) and a JCC membership registration form (for new members) or a JCC membership renewal form (for renewing members). The check must be pre-printed with the member's name and account number on it. We will then complete our verification process and issue your JCC membership card(s).

Terms and Conditions

1. I understand that this is a continuous plan (minimum of 12 months) and that this membership will remain in effect for as long as I retain the membership card issued to me.
2. I understand that if I wish to terminate after a minimum of 12 months or change my membership in any way, I must give the JCC a 30 day written notice. I understand that I must turn in all my membership cards upon termination.
3. I understand that if payments are not made in accordance with this plan, I surrender all membership privileges and program participation for all family members on my account.
4. The JCC Board of Directors may, at their discretion, adjust the monthly rate applicable to my category of membership once per year.
5. Should any membership deduction not be honored by my bank for any reason, I realize that I am still responsible for the payment, plus an administrative service charge.
6. Memberships are not refundable or transferable.
7. I understand that my checking account will be debited and/or my credit card charged on or about the 10th of each month. Unless I choose to pay in full, I will be automatically debited and/or my credit card charged the annual membership rate in full at my renewal date.
8. Membership cards remain the property of the JCC and must be surrendered upon request.

SIGNATURE: _____

DATE: _____

ACCEPTED/REVIEWED BY: _____

DATE: _____



WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT; PLEASE READ CAREFULLY

I, on behalf of myself and my family members and minors listed below ("I"), the undersigned, upon joining the Friedberg JCC agree to abide by the policies, rules, and by-laws of the Friedberg JCC.

I understand that engaging in the different activities and programs at the Friedberg JCC, are done at my own risk, and that it is my sole responsibility to ensure that I am in the proper physical condition to engage in such activities or programs. I understand and acknowledge that participation and/or observation in the programs offered by the Friedberg JCC, could in some circumstances result in physical injury, illness, (including exposure to and infection with viruses or bacteria), and including death, despite all safety precautions, and that I assume all risks and hazards incidental to the programs or activities in which I engage.

Coronavirus, COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, and permanent disability, and death. Participating in Friedberg JCC programs or accessing the Friedberg JCC facilities could increase the risk of contracting COVID-19. The Friedberg JCC in no way warrants that COVID-19 infection will not occur through participation in Friedberg JCC programs or through access to the Friedberg JCC facility, and on behalf of myself and my family members and minors, assume the risk of such illness, injury, disability and death in connection with COVID-19.

To the maximum extent permitted by law, I hereby release, indemnify, and hold harmless the Friedberg JCC, its employees, contractors, instructors, officers, directors, members, managers, agents and representatives, from any and all claims, loss, liability, actions, suits, expenses, damages, costs, or claims of any nature, in law or in equity, including attorney's fees and court costs, that may incur due to my presence and that of my family, in, upon or about the Friedberg JCC premises whether due to observation, participation in, or use of the property, facilities, services, including, but not limited to, the use of the swimming pool, use of the Friedberg JCC equipment, and participation in any and all programs offered by the Friedberg JCC Fitness Center, as well as activities, use, or participation in any affiliated programs.

I hereby assume full responsibility for and risk of loss and indemnify and hold harmless the Friedberg JCC, and its employees, contractors, instructors, officers, directors, members, managers, agents and representatives, for any claims, liability, damage, loss, psychological or bodily injury (including death) which may be sustained as a consequence of the attending at or participating in any and all of the programs, or any other activity connected with the Friedberg JCC, including use of the facilities and equipment, and transportation to and from these programs, notwithstanding any such damage, loss, psychological or bodily injury (including death) may have arisen out of the negligent acts or omissions or the gross negligence of the Friedberg JCC, and its employees, contractors, instructors, officers, directors, members, managers, agents and representatives.

I understand and acknowledge that the Friedberg JCC is not liable for any loss, damage or theft of Personal Property wherever located owned by myself or the persons listed below. Personal Property includes, but is not limited to, personal property located anywhere on the premises of the Friedberg JCC, in lockers, storage, parking lot, and on behalf of myself, my family any minor child listed below, hereby expressly waive any claim(s) which we may have against the Friedberg JCC arising from or as a result of any such loss, damage or theft.

I permit the free use by the Friedberg JCC in any manner whatsoever of my name and family members' name(s) and photos, without compensation paid to me or my family members.

If the member is under the age of eighteen (18), this form must be signed by a parent/guardian. I HAVE READ, FULLY UNDERSTAND, AND VOLUNTARILY SIGN THIS RELEASE, WAIVER AND INDEMNITY AGREEMENT. I UNDERSTAND THAT I AM EXECUTING THIS RELEASE FOR MYSELF, MY CHILD OR WARD, (AND ON BEHALF OF HEIRS, PERSONAL REPRESENTATIVES AND ASSIGNS) and UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS, INCLUDING THE RIGHT TO SUE. I INTEND BY MY SIGNATURE THAT THIS BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Full Name (Please Print): _____

Signature: _____ **Date:** _____

I am the parent or guardian of the following minors and acknowledge that the terms and conditions of the above releases, waivers and Indemnifications apply to them and I am executing this on their behalf:

Name of Child/Minor: _____ Name of second Child/Minor: _____

Signature of Parent or Guardian: _____