



Non-Member/Guest Application Form

First _____ Last _____
Date of Birth _____ Gender M _____ F _____
Address _____
Phone _____
Emergency Contact _____ Phone _____
Drivers License or ID # _____

Parent/Guardian(for minor applicants)

It is the responsibility of every individual or their parent/guardian to provide their own accident and health insurance coverage while participating in YMCA activities. Neither accident nor health insurance coverage is provided by the YMCA-NC. Due to the nature of our membership, it is the policy of the YMCA-NC to deny membership or entry to any registered sex offender and to terminate the membership of any member of the YMCA-NC who is required to register as a sex offender.

I agree to abide by the YMCA-NC Code of Conduct as posted throughout the building as well as all YMCA policies.

By participating in the YMCA Nationwide Membership Program, I agree to release the National Council of Young Men's Christian Associations of the United States of America, and its independent and autonomous member associations in the United States and Puerto Rico, from claims of negligence for bodily injury or death in connection with the use of YMCA facilities, and from any liability for other claims, including loss of property, to the fullest extent of the law.

To the best of my knowledge, all information provided is correct and may be verified by the YMCA-NC. I understand and agree to the above statements.

Signature _____

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY