



## Fitness Center Rules & Guidelines

### Memberships

- 1) Fitness Center open to all members of the community 12 years of age and older.
- 2) Members ages 12-15 must have a guardian 18+ years old present in the Fitness Center.
- 3) Payment for memberships can be dropped off in the outside lock box after hours.
- 4) Visiting guests with a paying member may pay a \$5 daily fee, fill out Daily Membership paperwork, and drop in the outside lock box. For Week Pass, contact the Rec office for a temporary card.
- 5) Monthly membership fees are due before the last day of the prior month. Unpaid memberships will not be allowed access into the facility. Cards will be activated when memberships are paid.
- 6) Members must complete Membership Application and Membership Waiver.
- 7) Members are asked to consult a doctor or physician before beginning any exercise or training program.

### Card Access

- 1) Members have 24 hour access to the facility.
- 2) New members will receive an access card with New Registration Fee. Replacement cards are \$5. Family Memberships will be issued up to 3 cards (initial sign up only). Additional cards \$10.
- 3) Members 12-15 years may be issued an access card ONLY if not a part of Couple Membership or Family membership. However, guardian MUST be present in the fitness center while the dependent is exercising. NO EXCEPTIONS.
- 4) Only paying members are allowed access on that card. No 'piggy-backing' entrance or allowing access to non-paying individuals.

### Facility Use

- 1) Facility is monitored 24/7 by CCTV and all activity is recorded and kept for a period of 60 days.
- 2) Members are asked to wipe down all equipment they utilize during a workout. Disinfectant spray, paper towels, and gym wipes are located around the facility.
- 3) All fans, lights, TVs must be turned off upon leaving (unless being utilized by another member).
- 4) Only water is allowed past the entrance. All other drinks/food must be left at the entrance.
- 5) Conversations must be kept civil and polite for surrounding members. Refrain from profanity, rough talk, or shouting.
- 6) Televisions/music will be kept at appropriate levels.
- 7) Re-rack all free weights and return all equipment. Do not bang or throw weights as they will break.
- 8) Shirts must be worn at all times. No bare chests or sports bras.
- 9) Clean, closed toe athletic shoes only. Members must change shoes upon entering the facility.
- 10) Members may bring underage children into the facility ONLY if the child remains at entrance. Absolutely no playing around or on equipment and must remain out of the way of other members.
- 11) No tobacco (smokeless, vape, or otherwise) or alcohol allowed.
- 12) Weapons (conceal and carry, knives, etc.) not allowed.
- 13) If equipment needs attention, please inform Rec director ASAP. Do not use machines that are having problems.
- 14) Bathrooms are for member use only. Members must bring their own soap and towels for showers. Please treat with respect and clean up after use.
- 15) Leave the facility as good as or better than when you came.

### Infractions

*Members who are found not in compliance with the above rules and guidelines are subject to disciplinary actions upon discretion of Recreation Director.*

- 1) First Offense- Verbal/Written Warning
- 2) Second Offense- Membership revocation for 6 months
- 3) Third Offense- Permanent membership revocation
- 4) Those caught with vandalism or facility destruction will be subject to cover repair costs.
- 5) Other infractions subject to additional fines/penalties.

We are proud of our 24 hour access facility. We ask that you treat it kindly and with respect. If you have questions or concerns, want to schedule a tour, or would like to donate, contact the Recreation Director at 785.425.7016 or 785.425.8827. Visit our website at [www.stocktonrec.org](http://www.stocktonrec.org).



## Fitness Center Membership Application

<b>Single</b> <b>\$20/Month</b> <hr/> \$220/Year \$19/Month with Automatic Withdrawal (See ACH Form) Member Only  If age 12-15 years old, supervision of adult (18+) guardian is required	<b>Couple or Dependent</b> <b>\$30/Month</b> <hr/> \$330/Year \$29/Month with Automatic Withdrawal (See ACH Form) Member & 1 Family Member in Same Household If Family Member is a dependent, they must be 12-23 years old	<b>Family</b> <b>\$40/Month</b> <hr/> \$440/Year \$39/Month with Automatic Withdrawal (See ACH Form) Member & up to 4 Family Members in Same Household If Family Member is a dependent, they must be 12-23 years old
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First Time Registration Fee is \$10 (includes up to 3 Access Cards with Family Membership)      Replacement Card = \$5

<b>Weekly Pass - \$10</b>	<b>Daily Pass - \$5</b>
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\_\_\_\_\_  
Name (Last, First) Date of Birth

\_\_\_\_\_  
Email Address Phone Number

\_\_\_\_\_  
Mailing Address City State Zip Code

\_\_\_\_\_  
Emergency Contact Relation Phone Number

### Family Member Information (If registering Couple/Family Account)

\_\_\_\_\_  
Family Member #1 Relation Date of Birth

\_\_\_\_\_  
Family Member #2 Relation Date of Birth

\_\_\_\_\_  
Family Member #3 Relation Date of Birth

\_\_\_\_\_  
Family Member #4 Relation Date of Birth

#### CONDITIONS OF PARTICIPANTS

*Participants (members, family members, and dependents) understand that physical activities involve a higher degree of risk than normal activities. Consult your Doctor or Physician before beginning any fitness or training regimen. Stockton Recreation Commission cannot assume responsibility for the loss of personal property or injury to participants. Participants must present proper ID for facility participation. I have signed the appropriate Member/Guest Agreement and Waiver and read and understood Rules & Guidelines. I understand I am signing for all members who are registered on this account.*

\_\_\_\_\_  
Signature Date

Access Card # \_\_\_\_\_



## Fitness Center Member/Guest Agreement and Waiver

The undersigned member/guest agrees to abide by the rules of the Stockton Recreation Commission & Fitness Center.

### Waiver & Assumption of Liability and Risks

The undersigned member/guest agrees that all use of the Stockton Recreation Commission & Fitness facilities, services, equipment and programs shall be undertaken at his/her sole risk and Stockton Recreation Commission shall not be liable for any injuries, accidents or deaths occurring to member/guest, arising either directly or indirectly out of utilizing the Stockton Recreation Fitness facilities, services, equipment and programs. The undersigned member/guest declares that they have discussed with their Doctor or Health Professional to address any known health conditions (i.e., unstable high blood pressure, uncontrolled diabetes, heart conditions, etc) that may preclude participation in moderate to strenuous exercise and is physically able to participate in physical activity. The member/guest has medical clearance if any known health conditions exist and declares he/she is in good health to participate in physical activity. The member/guest, for himself/herself and on behalf of his/her executors, administrators, heir and assignees, does hereby expressly release, discharge, waive, relinquish, and agrees not to sue Stockton Recreation Commission, its officers and agents for all such claims, demands, injuries, damages or cause of action, for injury to my person during my use of any of the equipment within Stockton Recreation Commission & Fitness Center or any injury that might result following the use of the Stockton Recreation Commission & Fitness Center.

Member Name: \_\_\_\_\_

Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Minor Agreement

This agreement, signed by a legal guardian, will cover the undersigned single membership minor and/or all minors/children under a group membership. The undersigned legal guardian signifies agreement to policies, waivers, and rules for all minors under their family membership and/or the minor single membership of the undersigned individual below. As legal guardian, I understand that under no circumstance is a minor dependent(s) 12-15 years to be in the Stockton Recreation Fitness Center without my supervision or legal guardian.

Legal Guardian Name: \_\_\_\_\_

Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Authorization Agreement for Direct Payments (ACH Debits)

### Agreement for Direct Payments

I, \_\_\_\_\_, authorize the Stockton Recreation Commission (SRC) to debit entries to my account indicated below and the Financial Institution named below to debit same to such account on the 1st or 2nd day of each month for payment of my SRC Fitness Center Membership. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, funds may be actually withdrawn from my account on the above noted periodic transaction dates. If an ACH Transaction is rejected for Non Sufficient Funds (NSF) I understand that SRC may at its discretion attempt to process the charge again within 30 days, and I agree to an additional \$25 charge for each attempt, which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank or credit card company, so long as the transactions correspond to the terms indicated in this authorization form.

Checking

Savings

\_\_\_\_\_  
Name on Account

\_\_\_\_\_  
Financial Institution Name

\_\_\_\_\_  
Financial Institution City, State, Zip

\_\_\_\_\_  
Routing/Transit Number

\_\_\_\_\_  
Account Number

Total Per Month: \_\_\_\_\_

Date to Begin: \_\_\_\_\_

This authority is to remain in full force and effect until SRC has received written notification from me of its termination in such time and manner as to afford SRC and Solutions North Bank a reasonable opportunity to act on it.

Member Name: \_\_\_\_\_

Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please attach a copy of a voided check to this form before submitting and retain a copy of the form for your records.