

# TRAINING MEMBERSHIP AGREEMENT



PERSONAL INFORMATION			
First Name		Last Name	
Street Address		City	State      Zip
Phone		Email	
Date of Birth	Age	Emergency Contact Name/Relationship	Emergency Contact Phone

## To Be Completed by StudioFit50+ Staff

MEMBERSHIP PACKAGE TYPE & TERMS	To Be Completed by StudioFit50+ Staff
COMMITTED TO MY HEALTH _____ x's week for _____ months Begins ____/____/____ Ends ____/____/____ <input type="checkbox"/> Paid-In-Full <input type="checkbox"/> Monthly Auto-Debit      Initials: _____ The package is non-cancellable, non-refundable, and non-transferable POLICIES: 1) Training sessions are 40 minutes in length; 2) 24-hour notice is required to cancel & reschedule a training session reservation; unused sessions expire at the end of this membership agreement.	Membership Type: _____ Type: _____ _____ Session duration: _____

MONTHLY DEBIT AUTORIZATION	
<b>Monthly Auto Debit:</b> \$ _____ I authorize StudioFit50+ to automatically deduct my monthly dues from the credit card or bank account noted above in accordance with the terms and condition of this membership agreement. The deductions may begin on the above date and continue until I tell StudioFit50+ in writing to stop. I understand that I am in full control of my payment obligations. I have read and understand the "Credit Card/Bank Draft Authorization" Section 3(b) on the reverse of this form.	Begins: _____ Month/Day/Year Name on account: _____ _____ Credit Card # _____ Exp. ____/____ <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> Amex Name: _____ Date: _____

RELEASE OF LIABILITY   ASSUMPTION OF RISK   IMAGE RELEASE   BUYER'S RIGHT TO CANCEL
Using the StudioFit50+ (SF.50+) facilities involves the risk of injury to you or your guest, whether you or someone else causes it. Specific risks vary from one activity to another and the risks range from minor injuries to major injuries, such as catastrophic injuries including death. <b>In consideration of your participation in the facilities offered by SF.50+, you understand and voluntarily accept this risk and agree that SF.50+, its officers, employees, volunteers, agents, and independent contractors will not be liable for any injury, including without limitation, personal, bodily, or mental injury, economic loss or any damage to you your spouse, guests, unborn child, or relatives resulting from the negligence of SF.50+ or anyone on SF.50+'s behalf or anyone using facilities whether related to exercise or not.</b> Further, you understand and acknowledge that SF.50+ does not manufacture fitness or other equipment at its facilities, but purchases and/or leases equipment. You understand and acknowledge that SF.50+ is providing recreational services and may not be held liable for defective products. By signing below, you acknowledge and agree that you have read the foregoing and know of the nature of the activities at SF.50+ and you agree to all the terms listed on this agreement and acknowledge that you have received a copy of it. <b>YOU, THE BUYER, MAY CANCEL THIS AGREEMENT AT ANY TIME PRIOR TO MIDNIGHT OF THE FIFTH BUSINESS DAY OF THE FITNESS STUDIO AFTER THE DATE OF THIS AGREEMENT, EXCLUDING SUNDAYS AND HOLIDAYS. TO CANCEL THIS AGREEMENT, MAIL, EMAIL, OR DELIVER A SIGNED AND DATED NOTICE WHICH STATES THAT YOU, THE BUYER, ARE CANCELING THIS AGREEMENT, OR WORDS OF SIMILAR EFFECT. SUCH NOTICE SHALL BE SENT TO: STUDIOFIT50+, 937 COFFEE RD #600, MODESTO, CA 95355</b> IMAGE RELEASE By engaging in a trial, you grant SF.50+ the right and permission to use, publish and republish photographs, video or audio of you or images in which you may be included, in whole, part or composite, in any printed or digital matter or media for any legal purpose; By engaging in a trial you discharge SF.50+ from any and all claims and liabilities arising out of or in connection with the use of photographs, images, or information. Name: _____ Date: _____