



**FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

Application for YMCA of Martha's Vineyard Membership

Please complete the following information:

Join Date: _____ Full Pay Monthly E.F.T.

Length of Membership: Annual Short Term Seasonal Week

Type of Membership: Two Adult Family One Adult Family Individual Teen
 Senior Couple Senior Young Adult

First Name _____ MI _____ **Last** _____ M F
Occupation _____ **Employer** _____ **DOB** ___/___/___

Permanent Billing Address _____
City _____ **State** _____ **Zip Code** _____
Home Phone _____ **Cell Phone** _____
E-mail Address _____

Would you like to receive our monthly newsletter regarding events, programs and new classes being offered? **Yes** _____ **No** _____

Summer Mailing Address _____
City _____ **State** _____ **Zip Code** _____
Summer Phone _____

Emergency Contact Information
Name _____ **Relationship** _____ **Phone** _____

Family Membership Information (List Last Name if Different)

	Household Names	M/F	Birth Date	Relationship
01				
02				
03				
04				
05				
06				

111R Edgartown Vineyard Haven Road, Vineyard Haven, MA 02568 * www.ymcamv.org * (508) 696-7171

Discover how you can gain a greater sense of belonging, build stronger connections throughout our community, and grow in spirit, mind and body by becoming a member of the Martha's Vineyard Y.

The YMCA is a volunteer-driven organization. We utilize volunteers in programs like the Teen Center, after school program and fundraising events. We can certainly use your help.

Would you like a staff member contact you regarding volunteer opportunities at this time? Yes No

If yes, what special skills do you have?

_____ (e.g. carpenter, coaching, plumber)

What areas are you interested volunteering in?

_____ (e.g. youth sports coach, facility, special events)

In consideration of gaining membership or being allowed to participate in the activities and programs of the YMCA and to use its facilities, equipment, and machinery in addition to the payment of any fee or charge, I do hereby waive, release, and forever discharge the YMCA and its officers, agents, employees, representatives, executors, and all others from any and all responsibilities or liability for injuries or damages resulting from my participation in any activities or my use of equipment or machinery in the above mentioned facilities or arising out of my participation in any activities at said facility. I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any those mentioned or others, acting on their behalf or in any way arising out of or connected with my participation in any activities of the YMCA or the use of any equipment at the YMCA. I agree to adhere to all policies set by the YMCA as written in the YMCA Membership Handbook.

Signature _____ Date _____

PHOTO WAIVER

I understand that my photo, as well as all individuals listed on the membership application, may be taken by the YMCA on occasion, and I hereby grant permission for my name and likeness to be used for any legitimate purpose in any media now or hereafter developed by the YMCA of Martha's Vineyard.

Signature _____ Date _____

Payment Information:

Credit Card Cash EFT

Credit Card Payments

Visa Mastercard Discover AMEX

Card # _____ Exp. Date _____

Name on card _____

Signature: _____

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