

## Membership Application

☐ **NEW MEMBERSHIP**



### PRIMARY MEMBER INFORMATION

<input type="text"/>		<input type="text"/>
Last Name	First Name	Date of Birth (mm/dd/yyyy)
<input type="text"/>		
Address	City	State
<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Phone	Evening Phone	Email Address

SECONDARY MEMBER INFORMATION: Check one that applies ☐ Couple ☐ Dependent/Minor (Age 15-18)

<input type="text"/>		<input type="text"/>
Last Name	First Name	Date of Birth (mm/dd/yyyy)

### EMERGENCY CONTACT INFORMATION

<input type="text"/>		<input type="text"/>
Last Name	First Name	Phone Number

☐ **RENEWAL MEMBERSHIP**

### PRIMARY MEMBER INFORMATION

<input type="text"/>		<input type="text"/>
Last Name	First Name	Phone Number

### SECONDARY MEMBER INFORMATION

<input type="text"/>		<input type="text"/>
Last Name	First Name	Phone Number

### LOCKER RENTAL

☐ DAC Locker ☐ Rec Center Full ☐ Rec Center Half

Locker Number: \_\_\_\_\_

### TERMS AND CONDITIONS—SIGNATURE REQUIRED BELOW

- ☐ Membership cards are not transferable and the Recreation Center Staff reserves the right to revoke membership privileges if cards are used in this manner.
- ☐ Memberships are non-refundable and individuals must maintain active status with Drexel University to utilize Recreation Center Membership.
- ☐ Recreation Center members are subject to the Drexel University Code of Conduct and Membership Handbook while utilizing Recreational facilities.

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

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

### REFER A FRIEND PROGRAM (*New Members Only*)—Want up to 2 months FREE? It's Easy! Here's how...

Provide us with up to two friends' names and contact info of who you think would benefit from being a member at the Recreation Center. We'll contact them on your behalf and offer a free one-week trial membership. Then, for each friend that ends up joining Drexel Recreation Center, you will receive a free month of membership as part of our ongoing referral program!

Friend #1 Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Friend #2 Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

### OFFICIAL USE ONLY

Membership Type: \_\_\_\_\_

Period: \_\_\_\_\_

Verification Shown? ☐

Membership Fee: \_\_\_\_\_

Locker Fee: \_\_\_\_\_

Total: \_\_\_\_\_

Payment Type: ☐ Cash ☐ Check ☐ VC

☐ MC ☐ DC ☐ AX

☐ Payroll Deduction

Staff Signature: \_\_\_\_\_

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