



**WHS FITNESS CENTER**

**SUMMER MEMBERSHIP**

June 22 – August 19, 2016

**Come Get Fit at Wayland High!**

**PROGRAM DESCRIPTION**

The Wayland High School Fitness Center will be open to the public June 22 - August 19, 2016, on Mondays, Tuesdays, Thursdays and Fridays from 7-10:30 am and 2-5:30 pm. It will be staffed by NSCA Certified Strength and Conditioning Coach Sam Breslin and WHS Health Faculty Adam Hughes. All Fitness Center exercise and weight training equipment will be accessible, and staff will be available to monitor and oversee its use during the prescribed hours of operation. Individualized fitness programs or instruction will not be provided.

**MEMBERSHIP REGISTRATION**

**Personal Information**

Member Name:

Mailing Address:

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade at WHS: WHS Alumni: Y / N Gender: M / F Date of Birth: \_\_\_\_\_\_\_

**Membership Options**

To inform staffing needs, please indicate which days and hours you are ***most likely*** to use the WHS Fitness Center. This is not a hard-and-fast commitment.

\_\_\_ Mondays 7-8am 8-9am 9-10:30am

 2-3pm 3-4pm 4-5:30pm

\_ Tuesdays 7-8am 8-9am 9-10:30am

 2-3pm 3-4pm 4-5:30pm

\_ Thursdays 7-8am 8-9am 9-10:30am

 2-3pm 3-4pm 4-5:30pm

\_ Fridays 7-8am 8-9am 9-10:30am

 2-3pm 3-4pm 4-5:30pm

**Payment Options (*choose one)***

\_ $100 for 9-week membership

\_ $15/week for weeks (dates: )

Return this form with check or money order to: **WSCP**

 ***(no cash please)*  47 Loker Street, Wayland, MA 01778**





**EMERGENCY INFORMATION**

**Emergency Contacts**

Name: Phone:

Relationship:

Name: Phone:

Relationship:

Name: Phone:

Relationship:

**AGREEMENT TO POLICIES/LIABILITY WAIVER**

My signature on this form indicates agreement to abide by the policies set forth by the Fitness Center Personnel for the duration of this membership. My signature on this form also indicates that I am not under restriction by a medical professional regarding exercise and using weight training equipment such as that in the Wayland Fitness Center.

I/We release the Wayland School District, the Wayland Fitness Center and its supervisors of liability in case of injury or accident and agree to allow Fitness Center personnel to obtain medical treatment for the member listed below should it become necessary.

I/We understand that this registration, agreement and waiver are non-transferrable and that failure to abide by these policies may lead to temporary or permanent suspension of membership privileges without membership fee refund.

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Signature of Member Date

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Parent/Guardian Signature Date

(required if participant under 18 years of age on start date)

*Wayland Public Schools, 41 Cochituate Rd., Wayland, MA 01778*