

University of Massachusetts
 Clark Athletic Center
 100 Morrissey Boulevard
 Boston, MA 02125

Tel: 617.287.7801
 Fax: 617.287.7840
www.beaconsathletics.com

Date: _____
 Member# _____
 Staff Initials _____

Community Membership Application

(July 1, 2011- June 30, 2012)

Please print, fill in the form and bring to the Department of Athletics. Your photo will be taken for your Member ID.

Last Name	First Name	Initial	M/F Gender
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Address	City	State/Zip
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Home Telephone Number	Cell phone Number	Email Address
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Person to contact in case of emergency	(Relationship)	Address	Telephone Number
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Membership Types	Amount
Individual Community Resident Membership, UMASS Boston Staff Membership, UMASS Boston Faculty Membership	\$193.00
Family Membership	\$210.00
Youth Membership *Age 16-20 proof of age required	\$30.00
Senior Citizen Membership*age 62 or older/Clergy Membership	\$96.50
Family Member's Name	Birthdate
1.	
2.	
3.	

*Please make checks payable to: UMASS Boston Athletics

Benefits for UMASS Boston Community Members:

- Usage of the Clark Athletic Center swimming pool, ice rink and gym. For swimming lesson information, please call (617) 287.6788. Lockers are available and can be used on a daily basis.
- To follow UMASS Beacon Sports Teams and For schedule information, please visit our website: www.beaconsathletics.com.
- Please Note: Absolutely no refunds. Lost cards may be replaced at a charge of \$10.00 per card. For further information, please call the Athletics Department at (617) 287.7801. Children under 16 years of age are not allowed to use the facilities or swim in the pool without adult supervision. Also Memberships cannot be used at the Beacon Fitness Center.

RELEASE AND WAIVER
OF LIABILITY AND INDEMNITY AGREEMENT
(for UMASS Boston Clark Athletic Center Community Members)

In consideration of the UMASS Boston Clark Athletic Center's acceptance of my membership application and its permission to use its facilities, I agree that I will indemnify, waive, release, absolve and hold harmless the UMASS Boston Clark Athletic Center and its directors, officers, employees, and agents against any loss arising out of or relating to any injury to or theft or misplacement of any personal property, including but not limited to jewelry, clothing, papers, and automobiles, that I or any member of my family bring into the UMASS Boston Clark Athletic Center premises, whether or not I or any member of my family owns the personal property.

I agree that I will indemnify, waive, release, absolve and hold harmless the UMASS Boston Clark Athletic Center and its directors, officers, employees, and agents, against any loss arising out of or relating to any costs I or any member of my family incur to physicians, dentists, hospitals, or other health care providers for injuries, diseases, or other medical conditions that occurred or were activated, aggravated, or caused while I or the member of my family was on the UMASS Boston Clark Athletic Center's premises.

I also agree that I will indemnify, waive, release, absolve and hold harmless the UMASS Boston Clark Athletic Center and its directors, officers, employees, and agents, against any loss arising out of or relating to my or any member of my family's use of the UMASS Boston Clark Athletic Center's facilities or my membership with The UMASS Boston Clark Athletic Center.

I understand that the UMASS Boston Clark Athletic Center's activities have inherent risks and I hereby assume all risks and hazards incident to my participation in all UMASS Boston Clark Athletic Center's activities. I further indemnify, waive, release, absolve and hold harmless the UMASS Boston Clark Athletic Center, the organizers.

Member/Parent Signature (if under the age of 18) _____ Date _____