## Membership Packages for the

## Walter F. Ehrnfelt Recreation Center

18100 Royalton Road, Strongsville, Ohio 44136 440.580.3260 www.strongsville.org

### Fees effective as of March 1, 2023

### **FOUR Membership Options**

Option 1: Sign an annual membership contract and pay in full at time of purchase.

Option 2: Sign an annual membership contract and pay monthly by credit card.

Option 3: Sign a 3 month membership contract and pay in full at time of purchase.\*

Option 4: Sign a 6 month membership contract and pay in full at time of purchase.\*

<u>Full-Time Worker in Strongsville:</u> Includes an employee of a City of Strongsville business or entity working at least 37.5 hours per week. Proof of such status provided through a letter from his/her employer and a current pay stub.

<u>Couple</u> means two adults 19 years of age or older living in the same residence, related or unrelated, which may include spouses, siblings, roommates OR a parent and his/her child between the ages of 4 and 24.

<u>Full-Time College Student</u> means a student currently enrolled in 12 or more credit hours. Proof must be shown at time of purchase or renewal in the form of a current class schedule or tuition bill.

<u>Family</u> means at least one adult and two or more dependent children up to the age of 24 years or two adults and one or more dependent children up to the age of 24 years (if a full-time college student), including stepchildren and adopted children, who have legal residence in the household of the adult(s).

<u>Senior Couple</u> means two individuals who are living in the same residence, one of whom is at least 60 years of age and the other who is at least 50 years of age.

<u>Military/Veteran</u> means an individual who is an active member or veteran of any United States military service and provides proof of veteran status (DD214) or for active members, a military ID.

**Resident** means an individual who is legally living within a permanent residence in the City of Strongsville.

- -Any adults wishing to qualify for a Couple, Senior Couple, or Family membership who do not share the same last name, each MUST provide independent proof of residency upon application.
- -Memberships are non-refundable and non-transferable.
- \*3 and 6 month memberships do not qualify member for member pricing, coupons or member priority registration. May register during resident registration.

### **Option 1** (pay entire year at time of purchase):

	RESIDENT or	
	FT Worker in Strongsville	NON-RESIDENT
Adult Individual (Ages 19-59)	\$265.00	\$425.00
Couple	\$365.00	\$580.00
Youth Individual (Ages 4-18)	\$165.00	\$290.00
Full-time College Student	\$165.00	\$290.00
Family	\$435.00	\$725.00
Individual Senior (Age 60+)	\$135.00	\$265.00
Senior Couple	\$240.00	\$465.00
Military/Veteran Adult	\$140.00	\$245.00
Military/Veteran Couple	\$240.00	\$400.00
Military/Veteran Youth (Ages 4-18)	\$87.00	\$162.00
Military/Veteran Adult Family	\$290.00	\$510.00

### **Option 2** (sign an annual contract and pay by credit card monthly):

	RESIDENT or	
	FT Worker in Strongsville	NON-RESIDENT
Adult Individual (Ages 19-59)	\$22.09/month	\$35.42/month
Couple	\$30.42/month	\$48.34/month
Youth Individual (Ages 4-18)	\$13.75/month	\$24.17/month
Full-time College Student	\$13.75/month	\$24.17/month
Family	\$36.25/month	\$60.42/month
Individual Senior (Age 60+)	\$11.25/month	\$22.09/month
Senior Couple	\$20.00/month	\$38.75/month
Military/Veteran Adult	\$11.67/month	\$20.42/month
Military/Veteran Couple	\$20.00/month	\$33.34/month
Military/Veteran Youth (Ages 4-18)	\$7.25/month	\$13.50/month
Military/Veteran Adult Family	\$24.17/month	\$42.50/month

### Credit Card Payment Plan Information

- The annual membership is broken down into twelve installments plus a \$3 per month processing fee. (Processing fee is NOT included in the above monthly prices.)
- The first payment is due upon the date of purchase and pro-rated from the date of purchase to the end of the current month.
- The remaining eleven payments are charged to your MasterCard, Visa or Discover, as indicated by you, on the 20<sup>th</sup> of each month, or the next business day if the 20<sup>th</sup> falls on a weekend or holiday, until the expiration date of the annual contract.
- In the event that a patron defaults on their monthly payment, the membership will be immediately suspended. Patrons will have 10 business days to pay the Ehrnfelt Recreation Center the amount owed for that month and an additional \$10 processing fee.
- In the event the patron does not pay off the balance owed by the 11th business day, the annual membership will be cancelled and any future use of a payment plan option will be denied.

### **Option 3: THREE Month Membership** (pay entire 3 months at time of purchase):

	RESIDENT or	
	FT Worker in Strongsville	NON-RESIDENT
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Adult Individual (Ages 19-59)	\$80.00	\$128.00
Couple	\$110.00	\$174.00
Youth Individual (Ages 4-18)	\$50.00	\$87.00
Full-time College Student	\$50.00	\$87.00
Family	\$131.00	\$218.00
Individual Senior (Age 60+)	\$41.00	\$80.00
Senior Couple	\$72.00	\$140.00
Military/Veteran Adult	\$42.00	\$74.00
Military/Veteran Couple	\$72.00	\$120.00
Military/Veteran Youth (Ages 4-18)	\$26.00	\$49.00
Military/Veteran Adult Family	\$87.00	\$153.00

<sup>-3</sup> month membership valid 93 days from date of purchase -Does not receive member coupons -Does not qualify for member pricing or priority registration. May register during resident registration.

## Option 4: SIX Month Membership (pay entire 6 months at time of purchase):

	RESIDENT or	
	FT Worker in Strongsville	NON-RESIDENT
Adult Individual (Ages 19-59)	\$159.00	\$255.00
Couple	\$219.00	\$348.00
Youth Individual (Ages 4-18)	\$99.00	\$174.00
Full-time College Student	\$99.00	\$174.00
Family	\$261.00	\$435.00
Individual Senior (Age 60+)	\$81.00	\$159.00
Senior Couple	\$144.00	\$279.00
Military/Veteran Adult	\$84.00	\$147.00
Military/Veteran Couple	\$144.00	\$240.00
Military/Veteran Youth (Ages 4-18)	\$52.00	\$97.00
Military/Veteran Adult Family	\$174.00	\$306.00

<sup>-3</sup> month membership valid 93 days from date of purchase -Does not receive member coupons -Does not qualify for member pricing or priority registration. May register during resident registration.

# Ehrnfelt Recreation Center Annual Membership Application Option 1: Payment in Full

<u>Circle Membership</u> Stron	gsville Resident(s) Non-R	esident(s) Non-Resid	lent/Full-Time Work	
Membership Type (circle o	ne) Family Adult Inc	dividual. Youth Indivi	dual Senior College Co	ouple Senior Couple
	Military Adult	Military Couple	e Military Family	Military Youth
		PRIMARY ME	MBER	
First Name		_ M.I Last	Name	
				_
			Cell Phone (_	
Birthdate -		Sex	 Email	
		FAMILY		
(18 yr	s. & under living at above	address OR 24 yrs. &	under enrolled as full-time co	ollege student)
<b>T</b>	•		family members below spou	1se.
First Name	<u>Last Name</u>	Birthdate 	Age Sex	All memberships are
				NON-REFUNDABLE and
				NON-TRANSFERABLE
			<del></del>	
EMERGENCY CO	NTACT NAME		Relationsl	hip
				ne (
Daytime I none (	_)Eveni	ing I none (	) Cen 1 no	inc (
	AGRE	EMENT AND AU	<b>THORIZATION</b>	
from the date of application and	d is non-transferable and non-refu	indable. I understand that	I take responsibility for the accurac	inderstand that membership is for one year y and completeness of all the information
I understand that this Agreemen	t is binding on me, my legal repre	formation is solely my respected and heirs. Author	oonsibility, and I hereby release all ot norization is also given to the City of	her parties from any and all responsibility. Strongsville to release the information on
this application to emergency ca		WAIVER AND R		
tivities at the Ehrnfelt Recreation	on Center, the undersigned does	hereby waive, release, sav	e, and hold harmless and indemnify	ermission to engage in the recreational ac- the City of Strongsville, the Strongsville
loss of property which may be o	aused by any act or failure to act	on the part of the City of S	Strongsville, the Strongsville Parks, F	ms for damage for personal injury to me or Recreation & Senior Services Department,
			es the risk of all dangerous conditions c notice of the existence of such dang	s in and about the City of Strongsville and erous conditions, if any.
SIGNATURE  If under 18 yes	ars old, MUST be signed by paren	nt or guardian		DATE
"Recferral" Name				
	FOR STAFF USE			~~~~
PROOF OF RESIDENCY OR I	FULL-TIME EMPLOYMENT SE	IOWN:		
PROOF OF AGE (Ages 12-18 of	or 60+) OR FULL-TIME COLLE	GE SHOWN:		MBERSHIP BENEFITS  EST PASSES
PAYMENT TYPE (circle all t	hat apply):		COUPON	
Cash Check #	Gift Certificate #	Recreation Accou	ınt \$	RINITIALS —
Visa / MasterCard / Discover	Expire DateV	/#		(required)
TTL AMT PAID \$	STAFF NAME D	ATE		

## **Ehrnfelt Recreation Center Annual Membership CONTRACT**

## Option 2: Yearly Contract with Monthly Payment Plan

Circle Membership Strong	sville Resident(s)	Non-Resident(s)	) Non-Res	ident/Full-T	ime Work	
Membership Type (circle on	<u>e)</u> Family	Adult Individual.	Youth Indiv	idual Sei	nior College Co	ouple Senior Couple
	Military	Adult Mi	ilitary Coup	le	Military Family	Military Youth
		PRI	MARY MI	<u>EMBER</u>		
First Name		M.I	Last	Name		
Home Phone ()_						
(18 yrs.	& under living	at ahove address	FAMIL OR 24 vrs.	<u>Y</u> & under en	rolled as full-time co	ollege student)
( - )					nembers below spou	
First Name	<b>Last Name</b>		<u>thdate</u>	<u>Age</u>		All memberships are
						NON-REFUNDABLE and
						NON-TRANSFERABLE
EMERGENCY CON	TACT NAM	E			Relationsl	nip
Daytime Phone (	)	_Evening Pho	ne (		Cell Pho	ne ()
of my knowledge and belie refundable. I understand that realize that updating of this understand that this Agreem release the information on the WAIVER AND RELEASI granting me permission to esave, and hold harmless are organizers, officers, employed be caused by any act or failutheir organizers, officers, em	ef. I understand of I take responsible information is sent is binding on his application to I In consideration agage in the record indemnify the tees, agents, and some to act on the polyees, agents, a Ehrnfelt Recreati	that membership is a court of the accuracy of	is for one your acy and commibility, and I resentatives and the Ehrnich in the Ehrnich in the Ethical all claims Strongsville, undersigned	ear from the pleteness of hereby reland heirs.  Ind the Stronfelt Recreater rongsville For damage the Strongs further assu	the date of application of all the information ease all other parties. Authorization is also agsville Parks, Recreation Center, the under Parks, Recreation & for personal injury to sville Parks, Recreation the risk of all dates.	herein is true and correct to the best and is non-transferable and non-filled in on this form by me. I also from any and all responsibility. I given to the City of Strongsville to ation & Senior Services Department resigned does hereby waive, release, Senior Services Department, their o me or loss of property which may on & Senior Services Department, angerous conditions in and about the ll specific notice of the existence of
Signature(If under	10 magus ald Mi	UCT be signed by	n avout ou a	audian)	Date	
FOR STAFF USE OF PROOF OF RESIDENCY OR I	NLY FULL-TIME EMPI	LOYMENT SHOWN	I:			
PAYMENT TYPE Visa / Mast						
STAFF		_				Option 2 : Page 1
MEMDED DENIEDIES	7 1				Mombarshin	(D coformal)

### **PAYMENT PLAN BILLING TERMS & CONDITIONS**

- The annual membership is broken down into twelve installments plus a \$3 per month processing fee.
- The first payment is due upon the date of purchase and pro-rated from the date of purchase to the end of the current month.
- The remaining eleven payments are charged to your MasterCard, Visa or Discover, as indicated by you, on the 20<sup>th</sup> of each month, or the next business day if the 20<sup>th</sup> falls on a weekend or holiday, until the expiration date of the annual contract.
- In the event that a patron defaults on their monthly payment, the membership will be immediately suspended. Patrons will have 10 business days to pay the Ehrnfelt Recreation Center the amount owed for that month and an additional \$10 processing fee.
- In the event the patron does not pay off the balance owed by the 11th business day, the annual membership will be cancelled and, future utilization of the payment plan option will be denied.
- Any changes in account information should be reported to the Ehrnfelt Recreation Center at (440) 580-3260, ext. 5279.

Cost Per Month\*: \$ Membership Expiration Date:

*Includes \$3/month processing fee			
<u>M</u>	ETHOD OF PAY	<u>YMENT</u>	
Credit Card: Visa	MasterCard	Discover	
Last Four # of Card	Expiration Dat	ee	V Code
Name as it Appears on Card			
Ι,	, aı	uthorize the Ehrnfel	t Recreation Center to
charge the MasterCard, Visa or Disco	over account refer	enced above for the	amount and frequency
indicated on the payment plan above.			
Customer Signature		<u> </u>	Date

# **Ehrnfelt Recreation Center Annual Membership Application** *Option 3: THREE MONTHS*

(Valid 93 days from date of purchase)

Circle Membership Strongs	ville Resident(s) Non-F	Resident(s) Non-Res	sident/Full-Time	Work	
Membership Type (circle one	Family Adult In	dividual. Youth Indi	vidual Senior	College C	ouple Senior Couple
	Military Adult	Military Coup	ole Mil	litary Family	Military Youth
		PRIMARY M	<b>EMBER</b>		
First Name		M.I Las	t Name		
					_
Home Phone ()_					
Birthdate	Age	Sex	Ema	ail	
	-	st then all additions	& under enrolle al family meml	bers below spo	ollege student) use.  All memberships are
	<u>Last Name</u>	Birthdate 	<u>Age</u>	<u>Sex</u>	NON-REFUNDABLE
					and NON-TRANSFERABLE
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from the date of purchase and is no in on this form by me. I also reali	the information contained here on-transferable and non-refund ize that updating of this information binding on me, my legal repre-	ein is true and correct to t lable. I understand that I mation is solely my respo esentatives and heirs. Au	take responsibility the best of my know take responsibility and I here athorization is also a	wledge and belief. I for the accuracy and eby release all othe	understand that membership is for 93 days d completeness of all the information filled r parties from any and all responsibility. If f Strongsville to release the information on
tivities at the Ehrnfelt Recreation Parks, Recreation & Senior Service loss of property which may be cau their organizers, officers, employed the Ehrnfelt Recreation Center prop	Center, the undersigned does es Department, their organizes sed by any act or failure to act es, agents, and sponsors. The	hereby waive, release, so rs, officers, employees, ag t on the part of the City of undersigned further assur-	for Services Departs ave, and hold harm gents, and sponsors f Strongsville, the S mes the risk of all of	nless and indemnify for any and all clai Strongsville Parks, l dangerous condition	permission to engage in the recreational active the City of Strongsville, the Strongsville ms for damage for personal injury to me or Recreation & Senior Services Department, as in and about the City of Strongsville and gerous conditions, if any.
SIGNATURE  If under 18 years	s old, MUST be signed by pare	ent or guardian			<u>DATE</u>
"Recferral" Name					
PROOF OF RESIDENCY OR FU	FOR STAFF USE LL-TIME EMPLOYMENT S			not qualify	nd that this membership does y me to receive member cou- nber rates on programs, rentals
PROOF OF AGE (Ages 12-18 or c	60+) OR FULL-TIME COLLI	EGE SHOWN:	<u>—</u>	etc, or prio	ority member registration. I
PAYMENT TYPE (circle all tha	t apply):			may regist	ter during resident registration.
Cash Check #	Gift Certificate #	Recreation Acc	count \$		
Visa / MasterCard / Discover I	Expire Date	V#		Signature	

TTL AMT PAID \$\_\_\_\_\_ STAFF NAME \_\_\_\_ DATE \_

# Ehrnfelt Recreation Center Annual Membership Application Option 4: SIX MONTHS (Valid 186 days from date of purchase)

Circle Membership Stron	gsville Resident(s) Non-	Resident(s) Non-Res	sident/Full-Time	Work	
Membership Type (circle o	ne) Family Adult I	ndividual. Youth Indi	vidual Senior	College Co	ouple Senior Couple
	Military Adult	Military Coup	ole Mil	litary Family	Military Youth
		PRIMARY M	EMBER		
First Name		M.I Las	st Name		_
Address		Zip		City	
Home Phone ()	Work l	Phone ()	C	Cell Phone (_	
Birthdate	Age_	Sex	Ema	ail	
	_	rst then all additions	& under enrolle al family memb	bers below spo	vollege student) use. All memberships are
First Name	<u>Last Name</u>	Birthdate 	<u>Age</u>	<u>Sex</u>	NON-REFUNDABLE
			·		and NON-TRANSFERABLE
By signing this form I certify the from the date of purchase and is in on this form by me. I also re understand that this Agreement this application to emergency ca  In consideration of the City of Stivities at the Ehrnfelt Recreation Parks, Recreation & Senior Serv loss of property which may be compared the Ehrnfelt Recreation Center processes the service of the Ehrnfelt Recreation Center processes and the service of the Ehrnfelt Recreation Center processes and the service of the	AGRI at the information contained her non-transferable and non-refur alize that updating of this info is binding on me, my legal rep llers.  Strongsville and the Strongsville on Center, the undersigned doe ices Department, their organiz aused by any act or failure to a yees, agents, and sponsors. Th roperty both real and personal a ars old, MUST be signed by pa	EEMENT AND AU Teein is true and correct to the dable. I understand that I rmation is solely my respooresentatives and heirs. Au  WAIVER AND Parks, Recreation & Senis hereby waive, release, signers, officers, employees, aget on the part of the City of the undersigned further assumed waive any and all speciment or guardian	UTHORIZAT the best of my knowl take responsibility and I here athorization is also at the second sec	Cell Pho Pledge and belief. It offer the accuracy and eby release all other given to the City of ement granting me phases and indemnify for any and all claimstrongsville Parks, Idangerous condition	anderstand that membership is for 186 days d completeness of all the information filled r parties from any and all responsibility. If Strongsville to release the information on the cermission to engage in the recreational active the City of Strongsville, the Strongsville ms for damage for personal injury to me or Recreation & Senior Services Department, as in and about the City of Strongsville and gerous conditions, if any.  DATE
"Recferral" Name					
PROOF OF RESIDENCY OR F	FOR STAFF USE TULL-TIME EMPLOYMENT			not qualify	nd that this membership does y me to receive member cou- nber rates on programs, rentals
PROOF OF AGE (Ages 12-18 o	or 60+) OR FULL-TIME COLL	EGE SHOWN:		etc, or pric	ority member registration. I ter during resident registration.
PAYMENT TYPE (circle all t	hat apply):			may regist	tor during resident registration.
Cash	Gift Certificate #	Recreation Acc	count \$		
Visa / MasterCard / Discover	Expire Date	V#		Signature	

\_\_ STAFF NAME \_\_\_\_\_ DATE \_