Annual Membership Packages for the

Walter F. Ehrnfelt Recreation Center

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

You now have two payment options (see back)

Option 1: Pay for the entire year membership at the time of purchase. Option 2: Sign an annual membership contract and pay monthly by credit card.

<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.

Family 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</u> means an individual who is an active and/or newly registered member of any United States military service, or who is an active member of any reserve unit and provides proof of imminent call up to active military status.

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.

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 | \$140.00 | \$245.00 |

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 | \$11.67/month | \$20.42/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 20th of each month, or the next business day if the 20th 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.

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

| <u>Circle Membership</u> St | rongsville Resident(s) N | on-Resident(s) Non-Resi | dent/Full-Time W | ork | |
|--|---|---|---|--|--|
| Membership Type (circle | <u>e one)</u> Family Adul | t Individual. Youth Individ | dual Senior | College Mi | litary Couple Senior Couple |
| | | PRIMARY ME | EMBER | | |
| First Name | | M.I Last | Name | | |
| Address | | Zip | | City | |
| | | k Phone () | | | |
| Birthdate | Ag | ge Sex | Emai | l | |
| (18 | yrs. & under living at ab Please list spous | FAMILY pove address OR 23 yrs. defirst then all additional | k under enrolled | l as full-time co ers below spou | ollege student) 1 se . |
| First Name | Last Name | Birthdate | Age S | <u>ex</u> | |
| | | - <u> </u> | | | All memberships are |
| | | | | | NON-REFUNDABLE and |
| | | | | | NON-TRANSFERABLE |
| | | | | | |
| By signing this form I certify from the date of application filled in on this form by me. I understand that this Agreer this application to emergency. In consideration of the City tivities at the Ehrnfelt Recre Parks, Recreation & Senior Soloss of property which may be their organizers, officers, em the Ehrnfelt Recreation Cent SIGNATURE | AG That the information contained and is non-transferable and no I also realize that updating of the nent is binding on me, my legaly callers. Of Strongsville and the Strongstation Center, the undersigned Services Department, their organice caused by any act or failure to ployees, agents, and sponsors. | REEMENT AND AU Therein is true and correct to the on-refundable. I understand that his information is solely my rest representatives and heirs. Auf WAIVER AND Reville Parks, Recreation & Senio does hereby waive, release, sanizers, officers, employees, age to act on the part of the City of The undersigned further assumatal and waive any and all specifications. | THORIZATI to best of my knowle to I take responsibility, and I he thorization is also give the services Department, and hold harmle the services Department, and sponsors for the strongsville, the Strees the risk of all dar | Cell Pho ON dge and belief. I ut ty for the accurace reby release all of ven to the City of ent granting me p. ss and indemnify or any and all clair ongsville Parks, F. ngerous condition | inderstand that membership is for one year yand completeness of all the information ther parties from any and all responsibility. Strongsville to release the information on the ermission to engage in the recreational active City of Strongsville, the Strongsville ms for damage for personal injury to me or Recreation & Senior Services Department, is in and about the City of Strongsville and the city of Strongsville and the conditions, if any. DATE |
| "Recferral" Name | EOD STAFE II | | | 1 | |
| PROOF OF RESIDENCY O | FOR STAFF U OR FULL-TIME EMPLOYMEN | SE ONLY NT SHOWN: | | | ~~~ <u>_</u> |
| PROOF OF AGE (Ages 12- | 18 or 60+) OR FULL-TIME CO | DLLEGE SHOWN: | | עו — | MBERSHIP BENEFITS EST PASSES |
| PAYMENT TYPE (circle a | | . | . 0 | COUPON | s > |
| Cash Check # Visa / MasterCard / Discove | Gift Certificate # r Expire Date | V# Recreation Acco | unt \$ | MEMBER | R INITIALS (required) |
| | STAFF NAME | | | | ~~~ [_] |

Ehrnfelt Recreation Center Annual Membership CONTRACT Page 1

Option 2: Yearly Contract with Monthly Payment Plan

| Circle Membership Stron | ngsville Resident(s) | Non-Resident(s) | Non-Res | ident/Full-Ti | ime Work | | |
|---|---|--|---|--|--|--|---|
| Membership Type (circle o | one) Family Ad | ult Individual. PRIN | | | or College | Military Couple | Senior Couple |
| First Name M.I Last Name | | | | | | | |
| Address | | | | | | | |
| Home Phone () | | | | | | | |
| Birthdate | | | | | | | |
| | | | | | | | |
| (18 yı | rs. & under living at a Please list spou | | | | rolled as full-tim embers below s | | |
| First Name | Last Name | | hdate | Age | ~ | F | |
| | | | | . <u></u> | | A 11 1 | 1. |
| | | | | | · —— | All members | - |
| | | | <u>-</u> | | | NON-REFUN | |
| | | | | | | NON-TRANS | FERABLE |
| | | | | | | | |
| | | | | | | | |
| EMERGENCY CO | NTACT NAME_ | | | | Relation | nship | |
| Daytime Phone (| _)F | Evening Pho | ne (| | Cell Pł | hone () | <u></u> |
| agreement and au of my knowledge and be refundable. I understand th realize that updating of th understand that this Agree release the information on WAIVER AND RELEAS ment granting me permiss lease, save, and hold harm organizers, officers, emplo be caused by any act or fai their organizers, officers, e City of Strongsville and th such dangerous conditions. Signature (If unde | lief. I understand that at I take responsibilities information is sole ment is binding on me this application to em SE In consideration to engage in the ruless and indemnify the yees, agents, and sportiure to act on the part employees, agents, and e Ehrnfelt Recreation | membership is y for the accurally my responsive, my legal represency callers. If the City of Steereational active City of Stronsors for any anof the City of Sponsors. The Center property | s for one y acy and combility, and besentatives rongsville a vities at the gsville, the d all claims Strongsville, undersigned both real at | ear from the pleteness of hereby releand heirs. A and the Strongsville for damage, the Strongs further assund personal | e date of applicate all the information as all other parameters. Authorization is a songsville Parks, Foreation Center, to Parks, Recreation for personal injurity syille Parks, Recreation the risk of all and waive any an | ation and is non-tran- tion filled in on this farties from any and a also given to the City Recreation & Senior the undersigned does on & Senior Services ry to me or loss of preation & Senior Servill dangerous condition and all specific notice | sferable and nor form by me. I als Il responsibility. of Strongsville to Services Depart hereby waive, re Department, the roperty which ma ices Department is in and about the |
| FOR STAFF USE OF PROOF OF RESIDENCY OF PROOF OF AGE (Ages 12-18) PAYMENT TYPE Visa / Ma | R FULL-TIME EMPLOY B or 60+) OR FULL-TIM asterCard / Discover E | E COLLEGE SHO | OWN: | V-Code: | | | |
| MEMBER BENEFITS | Member I | nitials | | •••••• | | hip "Recferral" | |

Ehrnfelt Recreation Center Annual Membership CONTRACT Page 2

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 20th of each month, or the next business day if the 20th 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: | |
|---|------------------------------|--|
| *Cost per month does not include \$3/month processi | ing fee | |
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| METHOD OF DAVMENT | | |

| METHOD OF PAYMENT | | | | |
|-----------------------------|----------------------------|---|--|--|
| <u>Credit Card:</u> Vi | sa MasterCard | Discover | | |
| Last Four # of Card | Expiration Date | e V Code | | |
| Name as it Appears on Card_ | | | | |
| Signature | | Date | | |
| | or Discover account refere | thorize the Ehrnfelt Recreation Center to enced above for the amount and frequency | | |
| Customer Sign | ature | | | |