THE 180 CENTER, Inc. MEMBERSHIP APPLICATION

Non-Transferable, Initial of Stat	П		_ Date _	
New Member- □	l Prev	vious M	ember- □	
Personal Information	=======			
pplicant's Name	į	Co-Applicant	t's Name	
pplicant's Birth Date	-	Co-Applicant's Birth Date		
Communication Address/Phone Infor	mation	<u>1</u>		
Number Street/P.O. Box/County Road				
City	State		Zip	
applicant's Phone Number	ī	Co-Applicant	t's Phone Num	ber
pplicant's Work Number	ī	Co-Applican	t's Work Numb	er
pplicant's E-mail address	ī	Co-Applican	t's E-mail Addre	ess
pplicant's Vehicle Make/Model & Tag Number	Co-Applicant's Vehicle Make/Model & Tag Number			
CHILDREN: Unmarried Children (A child 21 years of age or over <u>must</u> university, trade school, or has handicap co	becom	e a memb	er unless er	_
Name	Birt	hdate	Age	School

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Personal References

Five Signatures of reference are required. Those references must be members in good standing with The 180 Center. References are not required of the applicant that has been a previous member. The previous member must have been in good standing with the organization when membership was terminated.

Signature of Reference #1	Phone Number	
Signature of Reference #2	Phone Number	
Signature of Reference #3	Phone Number	
Signature of Reference #4	Phone Number	
Signature of Reference #5	Phone Number	
Date of Approval or Denial	Management Signature	
APPROVED MEMBERSHIP N	IIIMRED	

I, the Undersigned Applicant, further agree that the following provisions will be applicable to my membership in The 180 Center and hereby agree with the club as follows:

- Resignation or Termination of Member. Except as otherwise provided for herein, a member who either voluntarily resigns or is terminated by the club shall not receive any refund of any amount, including the joining fees paid to the club. Bank drafts and postdated checks will be canceled upon termination of membership. Members experiencing relocation to another city will be dropped without penalty.
- 2. **Transfer of a Membership.** A member is allowed to transfer membership privileges to a child without any penalty. The child's application must be approved by the Manager. The request must be made through the office located at 586 Hentz Road, Pope, MS 38620.
- 3. **Membership Approval**. All memberships are contingent upon approval by the Board of Directors at The 180 Center, which approval shall be at the club's sole and absolute discretion.
- 4. Membership Privileges. Membership in The 180 Center permits the member to use the club in accordance with the policies set forth by the Board of Directors. Membership in The 180 Center is not an investment in the company and does not give the member equity, ownership interest, or any property interest in the company or club facility. A member-only acquires a revocable license to use The 180 Center in accordance with the terms and conditions of the membership documents, as the same may be amended from time to time and this membership agreement.

Rights Reserved by The 180 Center.

The club reserves the right, in its sole and absolute discretion, to perform any and /or all of the following actions:

- a. Modify the membership documents
- b. Reserve memberships
- c. Make changes to the dues based on the needs of The 180 Center
- d. Reduce the joining fees paid by members
- e. Lease the club facilities
- f. Require or wave fees (Including but not limited to: One time fees, set up fees, Special fees, or Undetermined fees)
- g. Issue, add or modify any type, category, or class of membership
- h. Make any other changes in the terms and conditions of membership or the club facilities available for use by members

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- 5. **Express Authorization.** Upon signing this agreement, the applicant expressly authorizes the disclosure and release of information requested by the club for investigating his or her qualifications for membership, including, without limitation, to any credit history.
- 6. Assumption of Risk. The applicant hereby acknowledges and agrees that the use of The 180 Center and any privilege or service incident to membership is undertaken with knowledge of risk of possible injury. The applicant accepts any and all risk of injury, whether the injury is sustained by himself or herself, his or her spouse, his or her family members, and/or his or her guests while using the club or involved in any event or activity incident to membership in the club. In accepting the risk of injury, the applicant understands that he or she is expressly relieving The 180 Center and its directors, officers, members, employees, and affiliates from any and all loss cost, claims, injury, damages, or liability sustained or incurred by the applicant, the applicant's spouse, family members and/or guests resulting from or arising out of any conduct or event connected with membership in The 180 Center and/or use of the club facilities. If I am a parent, I agree that my children or other minors under my control and supervision will obey all rules and regulations established by The 180 Center at all times.

I, THE UNDERSIGNED APPLICANT, HEREBY ACKNOWLEDGE THE RECEIPT OF THE 180 CENTER MEMBERSHIP DOCUMENTS AND THAT I HAVE READ AND UNDERSTAND THEM, AND AGREE TO BE BOUND BY THE TERMS AND CONDITIONS THEREOF AS THE SAME MAY BE AMENDED FROM TIME TO TIME BY THE CLUB. I FURTHER ACKNOWLEDGE I AM NOT RELYING ON ANY ORAL REPRESENTATIONS IN ACQUIRING A MEMBERSHIP IN The 180 Center.

	APPLICANT
Applicant's Signature	
CO A	PPLICANT (If Applicable)
Applicant's Signature	

Type of Membership And Method of Payment

Married Adult Membership (2 Adults)
Monthly-\$55
Annual Pay \$660.00
Semi-Annual Pay \$330.00
(Full use of the facility with Parents on-site with children at all times- children can be
added on to membership for \$5 per. child extra a month – under 55 years.)
Individual Adult Membership – (1 Adult)
Monthly- \$45.00
Annual Pay-\$540.00
Semi-Annual-\$270.00
(Full use of the facility with Parents on-site with children at all times- children can be
added on to membership for \$5 per. child extra a month – under 55 years.)
Married Senior Membership (2 Married Adults)
Monthly- \$35.00 Annual Pay - \$420.00
Annual Pay - \$420.00
Semi-Annual Pay- \$210.00
(Full use of the facility – Children can be added on to membership for \$5 per. child
extra a month – 55 yrs. and up)
Individual Senior Membership (1 Adult)
Monthly-\$25.00
Annual Pay-\$300.00
Semi-Annual Pay- \$150.00
(Full use of the facility – Children can be added on to membership for \$5 per. child
extra a month – 55 yrs. and up)

Page 6 Membership Type and Payment Method

Military/First Responder Membership _____ Monthly-\$25.00 _____ Annual Pay-\$300.00 Semi-Annual Pay- \$150.00 (Must show proof of being a first responder or Military personnel- can have a child on the membership for \$5 per child extra a month) **Student Membership** _____ Monthly- \$20.00 _____ Annual Pay-\$240.00 Semi-Annual Pay- \$120.00 (Must be a high school student who does not have a parent as a member of the 180 Center- this membership is valid during the hours from 7 am-7 pm, Mon-Sat- 18yrs.and under) **Walking Track Membership** _____ Monthly- \$20.00 _____ Annual Pay-\$240.00 Semi-Annual Pay- \$120.00 (This membership is valid during the hours from 7 am-7 pm, Mon-Sat and is good for the walking track only- 21yrs.and up)

Any child 21 years of age or older must hold their own membership.

Page 7 Payment Authorization Form

AUTHORIZATION AGGREMENT FOR PREAUTHORIZED PAYMENTS

COMPANY		COMPANY	
NAMETh	ne 180 Center	ID NUMBER	
I (we) he credit/debit to r This auth written notificat	ereby authorize The 180 my (our) account indicat ority is to remain in full ion from me (or either o	Center, hereinafter "Company",	nas received
l c	hoose to auto dra	aft with credit card or de	ebit card:
Visa	MasterCard	American Express	Discover
Name on Card			_
Card Number _			-
Expiration Date)	CVC	-
expected b	y the 1 st of every \$25 and a susper	o draft. I understand my month or I am respons nsion of care will apply i	ible for a
NAME(S)			_
DATE		ID NO	
	SIGNED		
	SIGNED		

PAYMENTS AND FEES (NON REFUNDABLE)

□-\$75.00 -One Time Sign on Membership and Opening Fee *

- One Time Application Processing Fee*
- One Time Background Check Fee *
- Access Card Fee Per Card (Number of Cards) __2___ (\$10.00 each replacement Access Card if lost or stolen)

MARRIED ADULT MEMBERSHIP □-\$660.00 – Full Annual Fee □-\$330.00 – Semi Annual Fee \square -\$55.00 – Monthly Fee INDIVIDUAL ADULT MEMBERSHIP □-\$540.00 – Full Annual Fee □-\$270.00 – Semi Annual Fee - Monthly Fee **□-**\$45.00 MARRIED SENIOR MEMBERSHIP \square -\$420.00 – Full Annual Fee □-\$210.00 – Semi Annual Fee □-\$35.00 - Monthly Fee **INDIVIDUAL SIGNLE MEMBRSHIP** □-\$300.00 – Full Annual Fee □-\$150.00 – Semi Annual Fee □-\$25.00 - Monthly Fee MILITARY/FIRST RESPONSE MEMBERSHIP □-\$300.00 – Full Annual Fee □-\$150.00 – Semi Annual Fee □-\$25.00 Monthly Fee STUDENT MEMBERSHIP □-\$240.00 – Full Annual Fee □-\$120.00 – Semi Annual Fee □-\$20.00 - Monthly Fee WALKING TRACK MEMBERSHIP □-\$240.00 – Full Annual Fee □-\$120.00 – Semi Annual Fee □-\$20.00 - Monthly Fee

STAFF NOTES:

Page 9 Payment and Fees Cont.

\$	TOTAL DUE TODAY 🛚 -	PAID □-RECEIPT
	# OF ACCESS CARDS IS	SSUED
\$	NEXT PAYMENT DUE	DUE DATE
□-ANNUAL PAYMENT	□-SEMI ANNUAL PAYMENT □-M	ONTHLY PAYMENT
	MEMBI	ER(S) SIGNATURE(S)
	MEMBI	ER(S) SIGNATURE(S)

FINANCIAL FILE INFORMATION The 180 Center Use for filing and records CLUB USE ONLY

MEMBERSHIP NAME _____ First Name MEMBERSHIP NAME First Name MEMBERSHIP NUMBER _____ Issued By The Club □-Annual Member □-Semi Annual Member □-Monthly Member MEMBERSHIP TYPE □-MAM (Married Adult) □-IAM (Individual Adult) □-MSM (Married Seniors) □-ISM (Individual Senior) □-M/FRM (Military/First Responder) □-SM (Student) □-WTM (Walking Track) # OF ACCESS CARDS ISSUED □ - Cards Numbered
□- PHOTO IDENTIFICATION COPY APPLICATION ACCEPTED____ PROCESSED _____ FILED