

Step 2 Fill out the form below with your personal information:

PRINT CLEARLY

First Name		Last Name	
Address			
City		State	Zip
Date of Birth (show ID)			
Phone			
Home			
Cell			
E-mail			
Emergency Contact		Phone	
Medical conditions we should know about			

Are you a member of FBC Greenville

Other _____

Would you like more information about us? Yes No thanks

Step 3 Read and sign the waiver below:

In consideration for participation at the Activities and Youth Ministry Center (AYMC) at First Baptist Greenville (FBG), I agree to the following:

LIABILITY I understand that FBG assumes no responsibility for injuries that I or anyone in my family or under my control during my participation may sustain as a result of my physical condition or resulting from my participation in any athletic activities, the use of any equipment, or exercise. I hereby voluntarily release and discharge FBG, its agents, servants and employees from any and all claims for injury, illness, death, loss or damage that I or anyone in my family or under my control may suffer as a result of participation in these activities. I assume all risk for any and all injuries and illnesses that may result from participation in these activities.

TREATMENT I agree that in the event that I am injured or become ill while participating in any activity at the AYMC, I authorize FBG representative(s) and any attending medical personnel, should I be unable to make a decision, to perform medical treatments and/or procedures as they deem necessary and proper under the circumstances. I agree to hold blameless FBG, its representatives or attending medical personnel, from any and all actions, related risks and dangers, including negligence damages, and

liabilities arising out of the treatment of any sickness or injury. I also agree to assume full financial responsibility for all medical treatment and to waive any right that my family or I may have to bring a legal action to assert a claim against FBG.

PROPERTY I understand that FBG is not responsible for personal property lost or stolen while members and/or program participants are using FBG facilities or on FBG property.

ID CARDS I understand that AYMC ID cards (issued to AYMC members who are in 6th grade or older) can only be used to access the AYMC during normal hours of operation and that it will not deactivate the security alarm. In the event that I lose this card, I agree to notify the AYMC staff and pay a \$5 replacement fee.

PHOTOS I grant permission for my photo to be used on FBG's website and other media outlets.

I am at least 18 years old and the information that I have provided on this form is correct. I agree to the terms in the waiver above as well as to those of the AYMC Guidelines, which are listed in the brochure available at the Welcome Desk.

SIGNATURE (Parent or Guardian if Under 18)

DATE _____/_____/_____



The AYMC
at First Baptist

RATE AND PLAN DETAILS

CONGREGATION

- First Baptist Church members
- First Baptist Sunday School members
- First Baptist staff members
- ITP, ELC, FBCK families

COMMUNITY

- All others

General Plan – Walking Track, Locker Rooms, and Basketball Gym

Unlimited Plan – General Plan plus Fitness Room

Volunteer – Must be a member of FBG and on the approved volunteer list

Senior – 65 years and older

Student – Full time students or members 22 years and younger

Swamp Rabbit – Track and Lockers only

Greenville Tech – Unlimited membership; must show a Greenville Tech student ID;

- Fall Semester=August-December
- Spring Semester=January-May

STAFF ONLY
Do not write on this page.

Volunteer Name: _____

Volunteers: check the box for each task (for new members AND guests):

- Checked the enrollee's ID
 - Name on form matches ID
 - Birth date on form matches ID
 - Has student ID for student memb.
- Enrollee is not already in EZFacility with a balance due.
- Enrollee completely filled out form
 - Enrollee circled a plan
 - Enrollee filled in ALL personal info
 - Enrollee signed the waiver (or parent/guardian did if under 18)
- Accepted payment**
Payment amount and type: _____
- Took enrollee's photo**
Date _____ Time _____
Shirt or jacket color and type _____
- Put form and payment in safe

_____ **Mittie & Jennifer:** _____ EZF (details)
 _____ EZF (photo)
 _____ EZF (contract)
 _____ Deposit sheet _____ EZF (pymt)
 _____ Card (coded) _____ Card (printed)

AYMC ENROLLMENT FORM

Step 1 Circle the price of the membership you want:

Congregation Rates	General	Unlimited
Individual	No Charge	\$10/month \$120/year
Household	No Charge	\$15/month \$180/year
Senior/Student	No Charge	\$5/month \$60/year
Volunteer		No Charge

Community Rates	General	Unlimited
Individual	\$8/month \$80/year	\$20/month \$240/year
Household	\$12/month \$120/year	\$30/month \$360/year
Senior/Student	\$4/month \$40/year	\$10/month \$120/year
Swamp Rabbit Membership	\$5/month \$60/year	
Greenville Tech Students		\$30/ semester

(Descriptions of memberships on the back)