

# MEMBERSHIP REGISTRATION FORM

OFFICE USE ONLY

Last Name \_\_\_\_\_

Date Entered \_\_\_\_\_

**Must present Driver's License or SDSU ID and must be 18+ years old.**

☐ SDSU Student \$19/mo    ☐ SDSU Faculty/Staff \$29/mo    ☐ Reg. Alumni/ALI/Affiliate \$29/mo    ☐ Community \$39/mo

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Date \_\_\_\_\_ SDSU Red ID # \_\_\_\_\_

Gender    ☐ M    ☐ F    Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ Referred By \_\_\_\_\_

Phone 1 (\_\_\_\_) \_\_\_\_\_ Phone 2 (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ Apt \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Phone (\_\_\_\_) \_\_\_\_\_

**Circle your ethnicity code** (Optional—for SDSU statistical purposes only)

- |                                     |                |                          |                                |
|-------------------------------------|----------------|--------------------------|--------------------------------|
| 1 American Indian or Alaskan        | C Chinese      | T Thai                   | 4 Other Latino, Spanish Origin |
| 2 Black, including African American | J Japanese     | V Vietnamese             | S Other Southeast Asian        |
| 3 Mexican-American, Mexican         | K Korean       | G Guamanian              | 7 White                        |
| A Central American                  | R Asian Indian | H Hawaiian               | D Decline to State             |
| B South American                    | 5 Other Asian  | N Samoan                 |                                |
| Q Cuban                             | M Cambodian    | F Filipino               |                                |
| P Puerto Rican                      | L Laotian      | 6 Other Pacific Islander |                                |

**How did you first learn about the Aztec Recreation Center?** (Check only one)

- ☐ Flyer/Banner (LIT)    ☐ Daily Aztec (DA)    ☐ Walk In (WI)    ☐ Friend/Word of Mouth (WOM)    ☐ Google Search (G)
- ☐ Website    ☐ Mailing Yelp    ☐ Table (TAB)    ☐ Returning Member (RM)    ☐ ENS

## MONTHLY DEBIT AUTHORIZATION CONTRACT

☐ SDSU Student \$19/mo    ☐ SDSU Faculty/Staff \$29/mo    ☐ Reg. Alumni/ALI/Affiliate \$29/mo    ☐ Community \$39/mo

**1. Membership:** I agree to remain a Member of Aztec Recreation for a minimum of 4 months. I understand that I remain a member of the Aztec Recreation Center and my monthly debit continues until I submit a cancellation form.

**2. Cancellation:** I understand I must submit a cancellation form on-line to end my membership. All cancellations must be done online at:

**arc.sdsu.edu (Membership\Member Cancellation)**

Monthly Deadline: 24th

**3. Service Fee:** I understand an additional \$10 service fee will be assessed for "declined" (non-collected) dues on a credit card.

**4. Account Info:** It is my responsibility to keep my account information current (acct#, exp date, new bank info, etc). If my account is declined 3 consecutive months, I agree to provide alternate billing information. Otherwise, I may be subject to "short term" member rates.

**5. Refunds:** I understand it is my responsibility to notify the ARC of any account/billing problems within 30 days. Refunds will not exceed 3 months of membership dues.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please read carefully, fill out information and sign below.

### Checking:

- ☐ I authorize my Checking Account to be automatically debited \$ \_\_\_\_\_ /month for my membership fees.
- ☐ I have attached a voided check for EFT Processing of my monthly payment.

### Credit Card/Debit Card

- ☐ I authorize my MasterCard or VISA to be automatically charged \$ \_\_\_\_\_ /month for my monthly ARC membership fees.
- Card # (last 4 digits) \_\_\_\_\_ Exp. Date \_\_\_\_ / \_\_\_\_
- Address \_\_\_\_\_
- City/State \_\_\_\_\_
- Zip Code \_\_\_\_\_

**PLEASE READ, INITIAL & SIGN THE AGREEMENT ON THE BACK PAGE**

OFFICE USE ONLY

Entry Date \_\_\_\_\_ Initials \_\_\_\_\_ Scan Code \_\_\_\_\_

**AS/SDSU CAMPUS RECREATION  
ASSUMPTION OF RISK, WAIVER, AND RELEASE FROM LIABILITY**

In consideration of the use of the property, facilities, services, programs, activities and events provided by THE ASSOCIATED STUDENTS, including any travel related thereto, the undersigned agrees as follows:

- 1. RISK FACTORS.** The undersigned understands and acknowledges that the use of equipment and facilities provided by Associated Students and participation in the AS/SDSU Recreation Programs (Intramurals, Sport Clubs (extramurals), Physical Sports, Weight and Cardiovascular training, Aztec Adventures, Dance, Swimming, and any other programs and services sponsored by A.S. Campus Recreation Department) and related travel involves risk such as, but not limited to, the following which might result from the use of the equipment or facilities, from the activity itself, from the acts of others, or from the unavailability of emergency medical care: RISK OF PROPERTY DAMAGE, BODILY INJURY, AND POSSIBLY DEATH.
- 2. ASSUMPTION OF THE RISK.** The undersigned ASSUMES ALL RISKS WHICH ARE FORESEEABLE AND INVOLVED WITH OR ARISE OUT OF THE USE OF THE EQUIPMENT OR FACILITIES, THE ACTIVITY ITSELF, THE ACTS OF OTHERS, OR THE UNAVAILABILITY OF EMERGENCY CARE, including but not limited to, those RISK FACTORS described in Section 1 above.
- 3. ACKNOWLEDGEMENT OF POLICIES AND PROCEDURES.** The undersigned acknowledges reading and knowing all of the policies and procedures relating to the activities, facilities and/or equipment and understands that the safe and proper use of the facilities, equipment or participation in the activity is dependent upon carefully following such policies and procedures. (See <http://arc.sdsu.edu/membership> for more information.)
- 4. PREREQUISITE SKILLS AND TRAINING.** The undersigned acknowledges that he or she has the requisite skills, qualifications, physical ability and training necessary to properly and safely use the equipment and facilities and to participate in the activity itself. The undersigned agrees that if he or she has any questions as to what skills, qualifications or training is necessary to properly use the equipment, facility, or participate in the activity itself, then they shall direct such questions to the appropriate Staff Member on site.

ITEMS 1-4: Initials \_\_\_\_\_

- 5. RELEASE.** The undersigned RELEASES the State of California, the trustees of the California State Universities, San Diego State University, the Associated Students of San Diego State University and all of their officers, employees and agents and agrees NOT TO SUE them on account of or in conjunction with any claims, causes of action, injuries, damage, or cost of expenses arising out of the activity, including those based on death, bodily injury or property damage whether or not caused by the negligence or other fault of the parties being released.
- 6. PROMOTIONAL PERMISSION.** The undersigned gives permission to the Associated Students to use my name, family member's name, written testimonial, written evaluation and/or photographs and video in brochures, newspapers, broadcasts, telecasts, and any other form of communication.
- 7. WAIVER.** The undersigned waives the protection afforded by any statute or law in any jurisdiction including California Code 1542 whose purpose, substance and/or effect is to provide that a general release shall not extend to claims, material or otherwise which the person giving the release does not know of suspect to exist at the time of executing the release. This means, in part, that the undersigned is releasing unknown future claims.

ITEMS 5-7: Initials \_\_\_\_\_

- 8. INDEMNIFY AND DEFEND.** The undersigned agrees to INDEMNIFY AND DEFEND the State of California, the trustees of the California State Universities, San Diego State University, the Associated Students of San Diego State University and all of their officers, employees and agents (hereinafter jointly referred to as "indemnitee") against, and hold them harmless from any and all claims, causes of action, damages, judgments, cost or expenses, including attorney fees which in any way arise from the activity or this agreement and which include but are not limited to damages to or destruction of any property of the indemnitee of any others, injury or death to the undersigned or anyone else or any liability arising from the act or negligent act of the indemnitee, the undersigned or anyone else.
- 9. PAY.** The undersigned agrees to pay for any and all damages to any property or indemnitee caused by the undersigned either negligently, willfully or otherwise.
- 10. LEGAL FEES.** In the event of any controversy, claim or dispute between the parties arising out of or relating to this agreement or the breach hereof or the activity, the prevailing party shall be entitled to recover from the losing party reasonable expenses, attorney fees and costs.
- 11 REPRESENTATIVES.** The undersigned enters into this agreement for him/herself, his/her heirs, assigns and legal representatives.
- 12. EMERGENCY TREATMENT CONSENT.** The undersigned, as a participant in the subject activity, hereby consents to medical treatment in a medical emergency where the undersigned is unable to consent to such treatment.

ITEMS 8-12: Initials \_\_\_\_\_

- 13. INSURANCE.** The undersigned understands the Campus Recreation Program does not carry participant insurance. The undersigned is encouraged to have a physical examination and purchase health insurance prior to any and all participation.
- 14 ACKNOWLEDGMENT.** The undersigned has read and understands this agreement and realizes it relates to surrendering and releasing valuable legal rights and does so freely and voluntarily.

ITEMS 13 -14: Initials \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

STAFF Initials \_\_\_\_\_