



Payroll Deduction For Fitness Center Membership

Directions – Please complete this form and return it through campus mail to Cindy Lauer. If you are completing this form after the 5th of the month, please make your first payment directly to the fitness center in order to allow time for the Office of Human Resources to process your payroll deduction form. Please call Cindy Lauer with questions – 678-466-4974.

Name: _____ Laker ID#: _____

Department : _____ Campus Phone: x _____

Email: _____ @clayton.edu

Select: 12-month employee * 10-month employee † Full-Time Part-time Retiree

Note - Fitness Center membership dues are deducted on an “after tax” basis from your paycheck effective immediately. This membership runs on the same monthly cycle as all other benefits.

I hereby authorize the Office of Human Resources & Services to deduct \$_____ from my salary each month, to be paid to the Department of Recreation & Wellness. If I am paid bi-weekly, one-half of the amount will be deducted from each payroll. If there are three payrolls in a month, the third payroll will contain no deduction.

I hereby request cancellation of my Fitness Center payroll deduction. **Note – there is a one-month cancellation penalty for early termination from the multi-month membership (year or semester).** Should you decide to continue your Fitness Center membership separate from the payroll deduction program, you are responsible for notifying the Department of Recreation & Wellness.

Employee / Retiree Membership Plan Options – Please call 678-466-4971 for questions regarding plans. The semester plans run: **Fall:** September – December. **Spring:** January – April. **Summer:** May – August. Please make your selection by marking the appropriate boxes. Thank you!

Individual - The per month price will be adjusted accordingly if you are a **10-month employee** to **\$27.50 per month.** †

- Fall Semester \$100 (\$25 per month – submission deadline is August 30th)
- Spring Semester \$100 (\$25 per month – submission deadline is December 23rd)
- Summer Semester \$100 (\$25 per month – submission deadline is April 30th)
- Year * – Auto Renewal \$275 (\$22.92 per month; runs September 1 – August 31) *

Companion — Two people, same household, over age 16. The per month price will be adjusted accordingly if you are a **10-month employee** to **\$50 per month.** †

- Fall Semester \$200 (\$50 per month – submission deadline is August 30th)
- Spring Semester \$200 (\$50 per month – submission deadline is December 23rd)
- Summer Semester \$200 (\$50 per month – submission deadline is April 30th)
- Year * – Auto renewal \$500 (\$41.67 per month, runs September 1 - August 31) *

Family — Per Person price added to companion price listed above.

- Semester \$35
- Year \$75

Employee Signature _____ Date _____

For Office Use Only

DRW Reviewed: _____ Date: _____ Date sent to OHR: _____

OHR Representative: _____ Date Processed: _____