



## CENTENNIAL PLACE FITNESS CENTRE

MEMBERSHIP APPLICATION			SHADED AREAS FOR OFFICE USE ONLY			
MEMBERSHIP #	SECURITY CARD #	START DATE:	DD	MM	YY	
NAME FIRST	LAST	DOB:	DD	MM	YY	
HOME ADDRESS		HOME PHONE				
COMPANY NAME	WORK EMAIL	BUSINESS PHONE				
EMERGENCY CONTACT NAME	RELATIONSHIP	EMERGENCY CONTACT PHONE				

**CHECK APPROPRIATE BOX BELOW:**

- NEW MEMBER
- RENEWING MEMBERSHIP

MONTHLY FEE
PRO-RATED FEE
REJOINING ADMIN FEE
INITIAL PAYMENT

**CANCELLATION:** Cancellation notification must be received no later than the 20<sup>th</sup> of the month to be effective for month-end. There is a four (4) month minimum membership term. Tenants must pay a \$50.00 administration fee to rejoin.

**PRIVACY:** Centennial Place Fitness Centre is committed to protecting personal information by following responsible information handling practices in accordance with the provisions of the Personal Information Protection Act (PIPA) of Alberta. The member hereby gives permission for the Centennial Place Fitness Centre or its nominees, associates, and affiliates or their employees, to collect any personal information contained in this document, maintain personal information already on file and to collect further information for the purpose of contacting the member by mail, fax, telephone and/or email.

I understand and agree to the above. \_\_\_\_\_ (initial)

**PAYMENT AUTHORIZATION:** I hereby authorize the Centennial Place Fitness Centre to collect membership fees, by pre-authorized chequing or credit card payment, at the current rate. Rates may be adjusted in subsequent years with notice posted in the Centennial Place Fitness Centre 30 days in advance. I have read and understood the terms and conditions of membership.

New member orientation complete and copy of policies & procedures received. \_\_\_\_\_ (initial)

MEMBER SIGNATURE	DD	MM	YY
HSG AUTHORIZED SIGNATURE	DD	MM	YY

RETURN APPLICATION **INTACT** TO THE CENTENNIAL PLACE FITNESS CENTRE, INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.