



**DICKY BEACH GYM MEMBERSHIP APPLICATION FORM
TEMPLATE No. 015**

Name:		
Address:		
Telephone:		
Date of Birth:		
CRITERIA	YES/NO	COMMENT
Member for 15 years		
Membership Category:		
Emergency Contact Name and Address & Telephone Number		
<p>Declaration</p> <p>I acknowledge that I have read the Club's "Terms and Conditions for the use of the Club's Gym" and agree to be bound by those terms and conditions. I declare I have no medical condition that would involve a risk to me or any other users of the gym</p>		
Print Name		
Signature & Date		
<p>Approval</p> <p>Gym Supervisor (signature and date)</p> <p>Approval</p> <p>Life Saving Operations Committee (signature date)</p>		
OFFICE USE ONLY		
Member's Gym Induction Form Received – Date		
Member's Gym Waiver Form Received – Date		
Member provided a copy of ADM002 – Date		
Member payment received – Date and Amount		
Key No provided to member –		
Signature of Administration Officer & Date		
Date Key Returned		