



- New Membership**       **New Locker**  
 **Membership Renewal**       **Locker Renewal**

**PERSONAL INFORMATION (please print)**    If renewing and your information has not changed please check here

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

CSU/MEMBER ID # \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ GENDER (M/F) \_\_\_\_\_ MARITAL STATUS (M/S) \_\_\_\_\_  
(if applicable)

**LOCAL ADDRESS:**

STREET: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE # (\_\_\_\_\_) \_\_\_\_\_ CELL PHONE # (\_\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**HOW DID YOU HEAR ABOUT US?**  US MAIL  EMAIL  WEBSITE  AD  PROMOTION  OTHER \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ HOME PHONE # (\_\_\_\_\_) \_\_\_\_\_

**SPONSOR INFORMATION (if applicable)**

SPONSORING MEMBER: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

CSU/MEMBERSHIP #: \_\_\_\_\_ MEMBERSHIP TYPE: \_\_\_\_\_

**PLEASE NOTE IN ORDER TO PROCESS YOUR MEMBERSHIP THE FOLLOWING ITEMS ARE REQUIRED:**

Valid Photo ID (Valid Drivers License, College ID, Military ID, etc) Marriage License (Spouse Memberships)

**(Please Circle All That Apply Below)**

STUDENT MEMBERSHIPS	PD/EFT*	Annual	Semester	1 Month
Part Time	N/A	N/A	\$42.00	\$25.00
Off Semester	N/A	N/A	\$84.00	\$25.00
Spouse/Partner/Dependant	N/A	N/A	\$84.00	\$25.00
Locker Rental	N/A	N/A	\$35.00	N/A
FACULTY/STAFF MEMBERSHIPS	PD/EFT*	Annual	4 Month	1 Month
Full Time (or Spouse/Partner/Dependant)	\$26.25	\$315.00	\$150.00	\$50.00
Part Time/Bus. Partner (or Spouse/Partner/Depend)	\$30.00	\$360.00	\$180.00	\$60.00
Non Prime (or Spouse/Partner/Dependant)	\$18.00	\$216.00	N/A	N/A
Locker Rental	\$8.75	\$105.00	\$35.00	N/A
NON-AFFILIATES (Plus \$50 Initiation )	EFT*	Annual	4 Month	1 Month
Alumni	\$35.00	\$420.00	\$210.00	\$70.00
Sponsored	\$35.00	\$420.00	\$210.00	\$70.00
Community	\$40.00	\$480.00	\$240.00	\$80.00
Non-Prime	\$27.00	\$324.00	N/A	N/A
Locker	\$8.75	\$105.00	\$35.00	N/A

\*All Payroll Deduction (Faculty/Staff only) or Electronic Fund Transfers memberships (PD/EFT) are on an annual basis and can only be cancelled by the request of the member one year after the original membership start date.



## MEMBERSHIP DEFINITIONS

### AGE REQUIREMENT

You must be 13 years or older to purchase a membership. Members ages 13 to 17 must be accompanied by a parent or legal guardian and are required to complete a teen orientation to use the cardiovascular or selectorized fitness equipment. They are not eligible to use the free weight equipment.

### PART TIME STUDENT

Students that are taking 1 to 7 credit hours during the current semester who have paid the general fee.

### OFF SEMESTER STUDENT

Students previously enrolled in the past semester, but not for the current semester. These students are eligible for the off-semester rate for one semester. Continuing education, non-degree and guest students are not eligible for the off-semester rate. Off Semester Students are eligible to purchase a Recreation Center Parking Pass.

### FULL TIME FACULTY/STAFF

Employees with a 100% recurring appointment as full-time CSU employees as well as Emeriti and Associate of the University Retiree's.

### PART TIME FACULTY/STAFF/BUSINESS PARTNER

Part time employees with at least a 50% appointment with Cleveland State University are eligible for this membership during the semester the appointment is active. Part time faculty/staff are NOT eligible for payroll deduction. A business partner is an employee of a company affiliated with Cleveland State University through a management agreement to provide campus services. Any University retiree who is not classified as Emeriti or Associate of the University is also eligible for this membership.

### SPOUSE/PARTNER/DEPENDANT

Spouse or partner or dependant of faculty/staff may purchase a membership at a matching rate (student spouse/partner/dependant at off semester rate); marriage license is required. Partners are defined as individuals who are of the same gender, who share a regular and permanent residence, have a committed personal relationship, can demonstrate financial interdependence, and who are not legally married or in another domestic partnership. Same sex domestic partners of Faculty, Administrators and staff must complete an "Affidavit of Domestic Partnership" form from the university.

### ALUMNI

Alumni are defined as individuals that have graduated from CSU. Proof of graduation is required.

### COMMUNITY

Patrons who are not affiliated with CSU. Community members may also sponsor additional members at a discounted rate.

### SPONSORED

Active Recreation Center members may sponsor additional members at a reduced rate. No affiliation with Cleveland State University is needed for the sponsored individuals. Sponsored members may NOT sponsor additional members.

### NON-PRIME

This membership is perfect for the early bird or the weekend warrior. Includes building access during the following times: Monday - Friday 5:45am - 9am, Monday - Thursday 8pm - 11pm and Friday 6pm - 9pm as well as unlimited weekends. NOTE: Summer/Holiday hours will adjust to Monday - Friday 5:45am - 9am and 6pm - 9pm with unlimited weekends.

## MEMBERSHIP AGREEMENT

***Applicant, please read and sign:*** All memberships are subject to verification for proper classification. False/inaccurate information may result in loss of membership and may result in loss of future access. The information I have provided on this application is true. I will provide all documentation necessary to receive appropriate membership rates as determined by my membership class. I understand that my **membership is non-refundable and non-transferable** and can not be cancelled except in cases of a physician verified illness. Any membership cancellation will still incur a \$25.00 administrative fee.

**I also understand that the recreation center will be closed for one week every May for annual maintenance and repair and my membership will not be extended or refunded because of this closure.**

By signing below I am also acknowledging that Campus Recreation Services is not responsible for lost, stolen, or damaged passes. I understand I will be charged \$15.00 to replace my card if lost or stolen.

**MEMBERS SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### OFFICE USE ONLY:

Membership Length: \_\_\_\_\_ Membership Expiration Date: \_\_\_\_\_

Locker Length: \_\_\_\_\_ Locker Expiration Date: \_\_\_\_\_ Locker #: \_\_\_\_\_

Assumption of Risk, Waiver, and Release of Liability Form Signed (Y/N): \_\_\_\_\_

**AMOUNT PAID:** \_\_\_\_\_ **Membership Staff Name:** \_\_\_\_\_

**METHOD OF PAYMENT:**  Cash  Visa  MC  Check # \_\_\_\_\_  Payroll Deduction

Responsible Party \_\_\_\_\_  Promotion (Reward Coupon)  Gift Certificate # \_\_\_\_\_