



Academy of Hybrid Arts

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

**Membership Type:**

- \$65 Basic Package (4 classes in a month)
- \$105 Extended Package (8 classes in a month)
- \$145 Frequent Package (12 classes in a month)
- \$180 Free Flow Package (Unlimited classes in a month)
- \$180 FREE FLOW FAMILY BASIC: Shared/Family (16 classes in a month)
- \$250 FREE FLOW FAMILY: Shared/Family (Unlimited classes for whole family)
- Other - \_\_\_\_\_

**2. MEMBER DETAILS** (Renewing members complete if details have changed)

Sex: Male Female

Birth Date: \_\_\_/\_\_\_/\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Do you consent to receive information from Free Flow Academy via email? Yes / No

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

**3. MEMBERS DECLARATION & PAYMENT DETAILS**

Before signing this document, I have read, understand and hereby agree to the terms and conditions of membership as defined in Section 4 of this membership form and know that it affects my legal rights. I agree to pay the following:

Monthly Gym Membership Fee of \$\_\_\_\_\_ on the 1<sup>st</sup> of every month

Start Date: \_\_\_/\_\_\_/\_\_\_ Expiration Date (if applicable): \_\_\_/\_\_\_/\_\_\_

**Note: If payment is not received after 5 business days of date due, gym membership will be cancelled.**

Please complete the card information below, which hereby authorizes Free Flow Academy to debit the following card for the above membership each month.

Name on Card: \_\_\_\_\_ Type of Card (Visa, Discover, etc.): \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Card Security Code \_\_\_\_\_ **If paying by check or Money Order**

**please make out to: Free Flow Academy**

Billing Address (if different from above): \_\_\_\_\_

Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

## 4. MEMBERSHIP TERMS & CONDITIONS – WAIVER & RELEASE

### Acknowledgment of Risks, Injury & Obligations

I acknowledge that the activity I am to undertake is a dangerous activity and that by participating in it I am exposed to certain risks. I acknowledge and understand that whilst participating in such activity:

- I may be injured, physically or mentally, or may die;
- My personal property may be lost or damaged;
- Other persons participating in such activity may cause me injury or may damage my property
- I may cause injury to other persons or damage their property
- The conditions in which the activity is conducted may vary without warning
- I may be injured or die or suffer damage to my property as a result of the negligence or breach of contract of Free Flow Academy
- There may be no or inadequate facilities for treatment or transport of me if I am injured
- I assume the risk of and responsibility for any injury, death or property damage resulting from my participation in the activity.

### Release and Indemnity

I participate in the activity at my sole risk and responsibility. I release, indemnify and hold harmless Free Flow Academy, its servants and agents, from and against all and any actions or claims which may be made by me or on my behalf or by other parties for or in respect of or arising out of any injury, loss, damage or death caused to me or my property whether by negligence, breach of contract or in any way whatsoever.

### Administration

- Appropriate workout attire must be worn at all times while in the gym facility.
- Memberships are not refundable or transferable.
- All weights and equipment must be put back after use.
- Membership card and/or Photo ID cards (ie student card or drivers license) must be carried and shown upon request.
- Shared gym access with a non-member will result in forfeiture of membership effective immediately.
- Each member must respect other gym users and behave in an appropriate manner at all times.
- Free Flow Academy Staff reserves the right to rescind the rights of members not complying with the terms and conditions of the membership.

I have read and agree with all of the above.

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

or Parent/Guardian Signature: \_\_\_\_\_

for \_\_\_\_\_ (print name) age \_\_\_\_\_ Date:

\_\_\_/\_\_\_/\_\_\_

Phone Number/Emergency Contact \_\_\_\_\_

Email \_\_\_\_\_

PLEASE RETURN THIS FORM TO THE FOLLOWING:

EMAIL: FreeFlowAcademy@gmail.com

FAX: (866) 531-8622 (Attn: Free Flow Academy)

Physical and Mailing Address: 1106 Tinker Rd. Suite 150 (Attn: Free Flow Academy)

Phone: 916-759-1468