



Rushville Fitness and Community Center Financial Assistance Membership Application

Applicant Information

First Name: _____		Last Name: _____	
Date of Birth: ____/____/____		Phone Number: _____	Email: _____
Address: _____		City: _____	State: _____ Zip: _____
Are you or another member of your household presently serving in the military?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you or another member in your household a veteran or retired from the military?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Household Information

Number in household under 18 _____	Number in the household over 18 _____	Total number of employed adults _____
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Membership Type

Please circle the membership you would like to apply for. (These memberships are limited to the silver plan only)					
Student	Adult	Active Military	Senior	Family	Active Military Family
<p>*Family and Military Family: 2-5 Individuals; up to 2 adults and dependent children under 18; dependents 23 and under if full-time college student living in the same household. *Student: 16-23 years old and a full-time high school or college student.* Military status must be active.</p>					

Family Member Information (If applying for a family Membership)

	First Name	Last Name	Date of Birth	Phone Number (if applicable)	Email Address (if applicable)
1.					
2.					
3.					
4.					
5.					
6.					

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Household Income

For this section, please include a printed copy of

1. Your most recent federal tax returns (1040, 1040A, 1099, or 1040EZ). Please black out all Social Security numbers
2. Two most recent pay stubs from all current employers for all working adults in your household.
3. Any government assistant letters (recent SSI or other government assistance award letter, disability checks, food stamps, unemployment, etc.) showing how much monthly Income you receive.

1. _____ Gross Monthly Income
2. _____ Spouse Gross Monthly Income
3. _____ Misc. Income (See number 3 above)
4. _____ Total Monthly Income (Add lines 1-3)
5. _____ Total Annual Income (Line 4 multiplied by 12)

Please share how receiving assistance with your membership fees would benefit you and/or your family?

I certify that the information provided on this form is true and completed to the best of my knowledge. I agree to notify the RFCC within 30 days of any changes to my income status, and I acknowledge that my membership may be terminated after failure to do so. I grant the RFCC permission to verify this information.

Applicant Name (Printed): _____

Applicant Signature: _____ **Date:** _____

****A new Form must be filled out with updated information each year to qualify for the financial assistance membership****

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WAIVER: THE MEMBER(S)/ GUESTS ACKNOWLEDGES AND ACCEPTS THE RISKS INHERENT IN THE USE OF THE RUSHVILLE FITNESS AND COMMUNITY CENTER'S SERVICES AND FACILITIES. THE MEMBER(S)/ GUESTS HEREBY VOLUNTARILY ASSUMES THE RISK OF INJURY, ACCIDENT, DEATH, LOSS, COST, OR DAMAGE TO HIS OR HER PERSON OR PROPERTY WHICH MIGHT ARISE FROM THE USE OF RUSHVILLE FITNESS AND COMMUNITY CENTER'S SERVICES OR FACILITIES. THE MEMBER(S)/ GUESTS, HIS OR HER HEIRS, EXECUTORS, REPRESENTATIVE, OR ASSIGNS, HEREBY RELEASE THE RUSHVILLE FITNESS AND COMMUNITY CENTER FROM ALL CLAIMS OR LIABILITIES FOR PERSONAL INJURY OR PROPERTY DAMAGE OF ANY KIND SUSTAINED BY THE MEMBER WHILE ON THE PREMISES OF THE RUSHVILLE FITNESS AND COMMUNITY CENTER. BINDING CONTRACT: This agreement represents the complete understanding between the member(s)/guests and the Rushville Fitness and Community Center unless modified in writing by the parties. No representations, written or oral, other than those contained within this agreement are authorized by or binding upon the Rushville Fitness and Community Center. If any term of this Agreement is to any extent invalid, illegal, or incapable of being enforced, such term shall be excluded to the extent of such invalidity, illegality, or unenforceability; all other terms hereof shall remain in full force and effect. Memberships are **NOT TRANSFERABLE. PHOTO USE RELEASE:** By registering for, participating in or attending Rushville Fitness and Community Center's programs, events, or other activities, the participant (or parent/guardian of a minor participant) irrevocably agrees to the use and distribution by the Rushville Fitness and Community Center of his or her image (or of his minor child/ward) in photographs, video recordings, and any other electronic reproductions of such programs, events and activities for any purpose without inspection or approval and without compensation, rights to royalties or any other consideration now and in the future.

ACKNOWLEDGEMENT OF RECEIPT & ACCEPTANCE: I, We, have read the above terms and conditions of membership and understand a listing of terms, conditions and usage policies are available for my review at www.rushvillefitness.com. I accept these terms, conditions, and usage policies as evidenced by my signature.

Assumption of Risk and Waiver of Liability

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is an extremely contagious disease and is believed to spread from person-to-person contact. The Rushville Fitness and Community Center has put in preventative measures to help reduce the spread of COVID-19; however, **the Rushville Fitness and Community Center cannot guarantee that you will not become infected with COVID-19.** Participation could increase the risk of contracting COVID-19.

READ CAREFULLY BEFORE SIGNING

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed or infected by COVID-19 by participation; and that such exposure or infection may result in personal injury, illness, permanent injury, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Rushville Fitness and Community Center may result from the actions, omissions, or negligence of myself and others, including but not limited to, the RFCC's employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expenses, of any kind, that I may experience in connection with my participation at the Rushville Fitness and Community Center. On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless the Rushville Fitness and Community Center, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or related thereto. I understand and agree that this release includes any Claims based on the action, omissions, or negligence of the Rushville Fitness and Community Center, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation at the Rushville Fitness and Community Center.

By signing this document, I agree that if I am exposed or infected by COVID-19 during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence. If I have signed a separate general waiver of liability connected to my participation at the Rushville Fitness and Community Center, I agree that the terms of that waiver are wholly incorporated into this document and that the terms of this document are incorporated into the separate general waiver.

I agree that I and my family will practice safe social distancing and clean hygiene during our participation at the Rushville Fitness and Community Center

Parent/ Guardian Additional Agreement

In consideration of me and my family being permitted to participate in activities, I further agree to indemnify and hold harmless Releases from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor

Print Name: _____ **Signature:** _____

RFCC Income Sliding Scale

Household Size						
	1	2	3	4	5	6+
75% off	\$0- \$9,975	\$0-\$13,490	\$0-\$17,005	\$0-\$20,520	\$0-\$24,040	\$0-\$27,550
50% off	\$9,976-\$11,335	\$13,491-\$15,330	\$17,006-\$19,325	\$20,521-\$23,320	\$24,041-\$27,315	\$27,551-\$31,310
25%off	\$11,336-\$12,880	\$15,331-\$17,420	\$19,326-\$21,960	\$23,321-\$26,500	\$27,316-\$31,040	\$31,311-\$35,580