

STATE UNIVERSITY OF NEW YORK AT NEW PALTZ
ATHLETIC & WELLNESS CENTER (AWC)

MEMBERSHIP APPLICATION

August 2009

Please complete this form and return to: SUNY New Paltz, Attn: Parking Office (HAB Lower Level Room 35). **Make checks payable to: SUNY New Paltz Recreation.** Membership cards are validated at the Meal Plan/ ID Office (SUB 100). Both offices' hours are Monday – Friday 8:30 am – 5:00 pm, and summer hours 8 AM - 4 PM. Membership rates are for either the full year (August-August) or Term (Fall semester through Winter intercession, or Spring semester through Summer session).

See Guest application for guest membership options.

Please select membership category

Membership

- | | |
|---|--------------------------------|
| <input type="checkbox"/> Faculty/Staff (Full and Part time) | \$200.00 a year / \$100 a term |
| <input type="checkbox"/> Alumni (includes parking) (<i>price subject to change</i>) | \$200.00 a year / \$100 a term |
| <input type="checkbox"/> Emeritus Faculty/ Retired Staff | \$200.00 a year / \$100 a term |
| <input type="checkbox"/> Initial Family Member of Fac/Staff (over 18 years old) | \$280.00 a year / \$140 a term |
| <input type="checkbox"/> Additional Family Members of Fac. /Staff
(over 18 years old) up to 4 immediate family members | \$75.00 a year |

Applicant's Name _____ M ___ F ___

Initial Family Member Name _____ Age _____ M ___ F ___

Additional Family Member Names _____ Age _____ M ___ F ___

(18 years and older) _____ Age _____ M ___ F ___

_____ Age _____ M ___ F ___

_____ Age _____ M ___ F ___

Home Address _____

E-Mail Address _____ Faculty/ Staff Department _____

Phone (day) _____ Phone (evening) _____

Parking: The Parking Office will issue alumni a parking pass for use with a valid vehicle registration and parking permit application. Family membership includes one parking permit for additional family members. Application is available on line at www.newpaltz.edu/parking or at the parking office located in HAB 35.

AWC Membership: AWC members must sign the Assumption of Risk and Release form and return it to the front desk of the AWC upon initial gym use. **Memberships are non-refundable, with the exception of documented medical reasons. Memberships are not prorated.** A fee of \$20.00 is charged for replacement of a lost or damaged ID card and for returned checks. All users must carry their ID card at all times.

Please note that the AWC will be available at reduced hours during student vacation periods, and will be closed from the last day of the summer session in August until the beginning of the Fall term for annual maintenance. Please contact (845) 257-3914 for hours of operation, or see the website: www.newpaltz.edu/recreation/awcmembership.html

I have read and understand the contents of this application.

Signature _____

Date _____

<u>For Office Use Only:</u>	
Date _____	Amt. Paid _____ Cash / Check / Credit Card
Expires ____/____/____	
Collected By (print) _____	____ New ____ Renewal