Laurel-Concord-Coleridge School FITNESS CENTER MEMBERSHIP CONTRACT

imary Member Name: DOB:		
Mailing Address:		
Phone Number:	Email Address:	
Family members (spouse and children	, including those in college) that may access the LCC Fitness	
Center(s) with this membership:		
1	DOB:	
2		
3		
4	DOB:	
	DOB:	
Please indicate which LCC School Fit Laurel Campus	ness Center(s) you request membership access to: Coleridge Campus	
(Fitness Equipment/Le	gacy Gym) (Fitness Equipment/Gym)	

LCC School is pleased to offer LCC Fitness Center membership access to residents living within the boundaries of the school district, as well as to all families who have children enrolled in the school. Please carefully review the following rules and guidelines established and required for LCC Fitness Center membership access.

Fitness Center Rules and Guidelines

- **Membership:** \$15 Monthly OR \$150 Annual Membership Fee (*subject to change*). Membership provides access to both LCC School Fitness Centers (Laurel and Coleridge campuses). Only those with paid active memberships are permitted access and use of the Fitness Center(s).
- **Keycard Access:** Access is granted to the Fitness Center(s) using a programmed, electronic keycard. Only approved family members should be permitted to use a member's keycard. Misuse of access privileges may result in membership suspension or cancellation. A \$10 fee will be assessed for replacement of lost or damaged keycards.
- Age Restrictions: Children under age 12 (7th Grade) may not use fitness equipment. All minors under age 12 (7th Grade), with membership access, must be accompanied by an adult (age 19 or older) with membership access.
- **Food and Drink:** Limit food and drink to water and sports beverages (e.g., Gatorade) only. Please clean up any spills.
- Use and Care of Equipment: Be courteous when others are waiting to use equipment and limit usage to 30 minutes. Remove and reset weights from bars when finished. Return all equipment to designated

locations. Use provided sanitary wipes to sanitize pads and equipment. Please help us maintain a clean and organized facility. Promptly report any problems with facilities or equipment to the district's Central Office (402-256-3133).

• Safety Considerations: Become knowledgeable regarding safety and correct use of equipment before exercising. Check with your doctor before using the Fitness Center(s) if you have questions or have concerns about your physical health that may be complicated by exercise.

FITNESS CENTER ACCESS	Morning Hours	Mid-Day Hours	Afternoon/Evening Hours		
Monday - Friday	5:00 am - 7:15 am	10:30 am - 2:00 pm	4:00 pm - 11:00 pm		
Weekends, Holidays, Non-School Days	5:00 am - 11:00 pm				
Summer Hours	Will be posted depending on Summer Weights schedule.				

Please Note: Hours are subject to change. LCC School reserves the right to schedule activities and/or close the facility. School activities take precedence over individual community member access.

Please review the following statements. Your signature indicates understanding and acceptance of these and all Fitness Center rules and guidelines.

- I understand that the LCC Fitness Center(s) are unsupervised.
- I understand that there are health risks associated with exercise. I voluntarily assume all risks of injury while using any of the equipment or facilities.
- I voluntarily waive any and all claims of injury against LCC School and its employees.
- I understand that all minors under age 12, with family membership access, must be accompanied by an adult member (age 19 or older) while using the Fitness Center(s) for any activity.
- I assume all risks of those under my access and supervision that use the Fitness Center(s).
- I understand damage to premises or equipment will be paid for by the Primary member (me).
- I agree to assist in monitoring and enforcing the membership rules and guidelines to ensure a safe and well-maintained Fitness Center.
- I understand that failure to follow these rules and guidelines may result in the loss or suspension of membership privileges.

Member's Signature		Date	
Keycard #	Issued by:	Expiration:	
Membership Type:	New MembershipMonthly (\$15/mo)	Renewal MembershipYearly (\$150/yr)	
Payment/Amount:	□ Cash \$	□ Check \$	