Fulltime Membership Application Updated 10/11

PREMIER
· AT SAWMILL ·
ATHLETIC CLUB

Apartment Community/Owner _Ardent Community_____

Office Phone Number_____

Lease Start Date_____

Lease End Date_____

Renewal End Date_____

Final Move Out Date_____

Apartment Membership includes up to a total of three.
-Up to two adults
- Immediate family; children under 18, living with tenant
Adult(s) to be included on the membership:

1.Name:_____ M / F
      Last   First   MI   DOB

2.Name:_____ M / F
      Last   First   MI   DOB

Child(ren) under 18 living with tenant - Additional adults or children 18 or older may be added for $200/tax

1.Name:_____ M / F
      Last   First   MI   DOB

2.Name:_____ M / F

Cell Number: Primary _____ Secondary_____

Email Address: Primary_____ Secondary_____

Apartment Address:_____ City:_____ Zip:_____

RELEASE OF LIABILITY—READ BEFORE SIGNING

In consideration of any and all participation in the club programs and activities including child care, and use all facilities and equipment, the undersigned: (1) agrees and understands that the risk of serious and permanent injury from the activities in the club does exist; (2) knowingly and freely assumes all risks; both known and unknown, even if arising from the negligence of the releases or others, and assumes full responsibility for participation and use of the facilities; (3) willingly agrees to comply with the stated and customary terms and conditions for participation; (4) agrees that if any unusual or significant hazard is observed, activities will be discontinued and such amtters will be brought to the attention of the nearest official immediately; and (5) for myself and on behalf of my heirs, personal representatives, next of kin, hereby releases and holds harmless the club, its owners, officers, agents, and/or employees, other participants , and if applicable, owners or lessors of premises (Releases) with respect to any and all injury, disability, death, or loss or damage to person or property, including vehicles parked on the premises, whether arising from the negligence of the releases or otherwise, to the fullest extent permitted by law.

_____   _____
Applicant's Signature   Date

_____   _____
Applicant's Signature   Date

For Parents/Guardians of Dependants under age 18

This is to certify that I, as parent/guardian with legal responsibility for this dependant/participant, do consent and agree to his/her release as provided above of all Releases and for myself, my heirs, assigns,and next of kin. I release and agree to indemnity and hold harmless the Release's from any and all liability incident to my dependant's involvement or participation in these provided above, even if arising from the Release's negligence to the fullest extent permitted by law.

_____   _____
Parent/Guardian Signature   Parent/Guardian Signature

Change of Status

Addition(s) to Application:

Name:_____Signature_____ M / F DOB_____

Name:_____Signature_____ M / F DOB_____
*I understand and agree with the release of liability statement above

Deletion(s) to Application:

Name:_____ M / F DOB_____

Premier at Sawmill Athletic Club • 3111 Hayden Road • Columbus, OH 43235 • (614) 336.2582 • (614) 336.3810 fax