

Athlete Agreement Form.

Enrollment Date: ____/____/____

Referred By: _____ Enrolled By: _____

First Name _____ Last Name _____

Address _____ City _____ State _____ Zip _____

DOB ____/____/19 Age: _____ Sex _____ Place of Employment: _____

CADL: _____ SSN _____ Email: _____

Home Phone (____) _____ - _____ Work Phone (____) _____ - _____ Mobile Phone (____) _____ - _____

Emergency Contact Name _____ Emergency Contact # _____

Public Safety / MIL / Student <input type="checkbox"/>
10 Class Pass (\$150.00)

Contract Package

(Please check appropriate box)

"SME Package" _____
"Special Event" _____

- Month to Month**
- Unlimited \$125.00 Month
 - MIL/LEO \$99.00 Month
 - 2 x week \$85.00 Month

- 6 Month**
- \$99.00 Month
 - \$85.00 Month
 - \$75.00 Month

- Other (see below)**
- -
 -

Total due today \$ _____ (This amount will be paid today OR the next billing cycle)

Membership Agreement

CrossFit Amundson. (hereinafter referred to as the Gym) will use its best efforts to assist the Athlete in achieving their maximum potential in physical fitness. The Gym is committed to providing and maintaining professional facilities, staff and a regular class schedule. The gym and the Trainers will give 110% effort to encourage, support and inspire the achievement of the Athlete's fitness goals. We ask the Athlete to commit to training at least 2 days a week, attending special gym events, and following a specific nutrition plan. Together we will succeed!

The Gym agrees to provide the Athlete with sessions on a scheduled basis established by the Gym, each session will be approximately 60 minutes in duration. Sessions scheduled may be modified at the discretion of the Gym from time to time for holidays, competitions and other gym activities. The Gym shall give prior notice of such modifications by general announcement.

The Athlete recognizes that regular class attendance is important for their progress and understands that it is the Athlete's responsibility to attend class. It is further understood that the Athlete is obligated to make payments whether or not they attend classes. Athlete understands month-to-month enrollment options require 7 days notice to make changes, including upgrading to the 6 month agreement rate, a temporary membership hold (vacation, new assignment, etc.) or cancelling membership. Notifications made within the 7 day time period can not be effected before the next billing cycle.

The Athlete further understands that failure to complete the classes does not relieve the Athlete of the obligation to pay the tuition in full. Athlete understands that, following a 6 month agreement, the package automatically converts to a month-to-month agreement, however the original 6 month agreement price is forever honored. (That's cool.)

The Athlete further agrees to waive any claim of damages against the Gym and/or its principles or its instructors in any case resulting from the activity. The names of Athletes and any photographs or motion pictures taken during the Gym's activities may be used for promotional purposes.

This agreement is non-transferable without the express written consent of CrossFit Amundson.

Payment Agreement – 6 Month Reaccuring Billing

The undersigned, jointly and severally, hereby promises to pay to CrossFit Amundson, sum of \$ _____ in _____ equal, consecutive monthly installments of \$ _____ each payable on the same day of each month commencing on the (1st or 15th) _____ day of _____, 20 _____, with the final installment payable on the _____ day of _____, 20 _____ representing the balance hereof. If any installment of this agreement is not paid at the time and place specified herein, the entire balance hereunder may become due and payable forthwith at the election of the holder of the Agreement. A month to month agreement requires a minimum of 7 days written notice before your next scheduled payment, or signee will be charged for the following month.

Credit card

Card # _____ - _____ - _____ - _____

Expiration Date ____/____

Name on card _____

Athlete Signature _____

Parent/Guardian (If client is under 18 yrs old) _____

In addition, if Agreement holder elects to receive a past due installment, there will be a \$10 late fee assessed for any installment received over 5 days late. All checks returned for reason of insufficient funds shall be charged to the student in the amount of \$45. Failure of the Agreement holder to exercise his/her rights under the Agreement shall not constitute a waiver of said rights.

The undersigned, all sureties, endorsers and guarantors hereof, hereby jointly and severally waive demand or presentment for payment, notice of dishonor, protest and notice of protest and hereby agree to pay, upon the default of any payment hereof, reasonable expenses of the holder of this Agreement in enforcing its collection. 6 month requires BOTH CC and EFT information.

Electronic Funds Transfer

Ck. Account # _____

Routing # _____

Bank Name _____

Account Type Checking Savings

Gym Manager / Owner _____

Date _____

The Athlete has carefully read this agreement and fully understands its contents and signs it voluntarily. The client is entitled to a copy of this disclosure form and agreement, and the client hereby acknowledges receipt of a copy thereof. NOTICE TO CLIENT: DO NOT SIGN THIS CONTRACT UNTIL YOU HAVE READ ALL OF IT. ALSO, DO NOT SIGN THIS CONTRACT IF IT CONTAINS ANY BLANK SPACES.1542. Certain claims not affected by general release. A general release does not extend to claims which the creditor does not know or suspect to exist in creditor's favor at the time of executing the release, which if known by him must have materially affected creditor's settlement with the debtor.