



# Gym | Application for casual membership

## Personal Details

**Applicants Name (Please print)** \_\_\_\_\_

**Postal address** \_\_\_\_\_

**Contact Telephone Number (Home)** \_\_\_\_\_ **(Mobile)** \_\_\_\_\_

**Email address** \_\_\_\_\_

## Declaration:

In making this application, acknowledge that I am 16 years of age or older and that this membership application entitles **only** me as a member to access the Ravensthorpe Gym and Hopetoun Gym.

By signing this application I understand I am fully responsible for my own health and wellbeing when utilising the facility and or engaging in any exercise program herewith. I also accept that failure to abide by the conditions of Gym Entry will result in cancellation of my membership. I indemnify the Shire against any loss or liability to my person and or property as a result of my participation and or utilisation of the facility.

I give my permission for the Shire of Ravensthorpe to use my email address for surveys, notification of new programs, programs of interest, newsletters and other relevant information.

I understand that the Shire of Ravensthorpe will not under any circumstances sell or share my details with any other party unless required by law.

I understand that by signing this form, I consent to providing my bank account details for the purpose of receiving my bond refund. I acknowledge that the refund may take up to two weeks to be processed.

## Signature

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent/Guardian (If applicant under 18 years)**

\_\_\_\_\_  
**Date**

**PLEASE NOTE: To ensure the fob remains operational, we request that the fob be stored separately from any form of magnetic card or mobile telephone as this may interfere with scanning.**

\* For bond refunds please use bond request form and attach this application to the back

**Office Use Only**

Membership Receipt # \_\_\_\_\_ Date: \_\_\_\_\_ Staff Initial: \_\_\_\_\_

Day \$15.00

Week \$33.00

25% Discount Aged Pensioner

50% Discount Emergency Service Volunteer

\$40.00 Bond - Trust number T \_\_\_\_\_

Expiry date \_\_\_\_\_

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