

The reason our membership/program cost is so reasonable is in part due to funding from the United Way and other organizations. Many of these organizations request the following information in order to continually provide funding. The information below is kept private and confidential. Survey information will be provided in a group excluding names.

Please to help us keep our cost low by answering the following:

Ethnicity:

- White/Caucasian Black/African American Hispanic//Latino Asian Other

Marital/Children status:

- Married with children Married, no children Single female, with children Single male, with children
 Single no children Other

Employment status:

- Employed Unemployed Retired Unknown

Household income:

- \$11,999 or under \$12,000 to \$14,999 \$15,000 or \$24,999 \$25,000 to \$49,999
 \$50,000 or above Unknown

Membership type:

- Adult Youth Youth/Young Adult Senior Family One Parent Family Military Financial Aid
 Non – Member

Shenango Valley YMCA Membership/Program/Special Event Release and Waiver of Liability

My child(ren) have doctor's permission to participate in YMCA activities/membership. I/we fully understand the potential risks involved in participation with this program/membership. In the event that a medical emergency should occur I/we hereby give permission on behalf of our child(ren) to receive emergency medical treatment.

I/we hereby release, waive, discharge and agree to indemnify and hold harmless the Mercer County Housing Authority, the Borough of Greenville, the YMCA and their directors, officers, employees, and agents from any loss, liability, damage, or any cost including any claim or demands therefore on account of any injury to my child(ren) or damage to our property while my child(ren) are upon the YMCA premises, or observing or using any facilities or equipment of the YMCA or participating in any YMCA program.

I/we hereby consent to having photographs/video images taken of my child(ren) by a YMCA staff member or a professional approved by the YMCA and the use of such visual images at the discretion of the YMCA. I/we hereby release the YMCA, its directors, officers, employees and agents from any and all liability, which may arise from taking or the use of such photographs/images. All negatives, positives, prints, or other visual images shall remain property of the YMCA.

I/we have read and voluntarily sign this release and waiver of liability. I further agree to follow YMCA Safety Policies and Procedures along with the Program Rules and Regulations and Membership Comfort and Safety Rules and Regulations. Failure to do so may result in expulsion from the YMCA and its programs. I/we have read and understand the YMCA Refund Policy on programs/memberships.

GREENVILLE BOROUGH RESIDENTS: I/we understand that my name or that of my child(ren), address, phone number, membership type and scholarship amount will be reported to the Borough of Greenville for tracking purposes, and hereby grant permission to the YMCA to report this information.

MERCER COUNTY HOUSING AUTHORITY RESIDENTS: I/we understand that my name or that of my child(ren), address, phone number, membership type and scholarship amount will be reported to the Mercer County Housing Authority for tracking purposes, and hereby grant permission to the YMCA to report this information.

Participant's Name

Age

Date

Participant's Name

Age

Date

Participant's Name

Age

Date

Mother/Legal Guardian Signature

Print Name

Date

Father/Legal Guardian Signature

Print Name

Date

Witness Signature

Print Name

Date