



The Ephrata Recreation Center
 130 South Academy Drive, Ephrata PA 17522
 (717) 738-1167
 www.ephratarec.com

PRE PAID MEMBERSHIP APPLICATION 2019

Type of Membership	Annual	2 Pay (due within 30 days)	Start-up Fee
Preschool (up to 5 years)	Free	N/A	
Student (6 to 18 years)	\$ 183	N/A	\$20
Individual Annual (19 & up)	\$ 300	N/A	\$25
Individual Matinee (Mon - Fri 10am -2pm)	\$ 216	N/A	\$15
Individual Platinum	\$ 660	()	\$25
Couple Annual	\$ 462	N/A	\$50
Couple Matinee (Mon - Fri 10am -2pm)	\$ 288	N/A	\$30
Couple Platinum	\$ 978	()	\$50
Family (includes up to 22 yrs old)	\$ 600	N/A	\$50
Family Platinum	\$1104	()	\$50

Wellness Center Orientation

[] Scheduled at registration

[] Call to Schedule
Best time: _____

[] Decline Orientation

____ Note: End of Oct
 2019 until February 2020
 the pool is closed Monday
 thru Friday 3:00 to 7:15pm

Phone # _____ School District/ Municipality _____

Address _____ City _____ Zip _____

E-mail Address _____

How did you learn about Membership Opportunities at the Rec? _____

Member's Last Name	First Name	MI	Birth date	M/F
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Main Contact: (If under 18 years of age Parent's name is needed) _____

MEMBERSHIPS ARE NONTRANSFERABLE, NONFREEZABLE, NONREFUNDABLE.
REFUNDS CANNOT BE GIVEN FOR ANY PREVIOUS PROGRAM REGISTRATIONS.

ERC's code of conduct, rules, and regulations are posted through out the building and I agree to comply with them. I understand that failure to comply with those terms will result in the loss of my membership without refund. ERC reserves the right to make additional rules and regulations and to amend or modify them. I hereby waive any claim for bodily injury or property damage against the Ephrata Recreation Center, its agents, servants and/or employees while a participant in activities and programs. I understand and acknowledge that there are risks of injury in recreational activities.

_____ Member Signature

_____ Date

For Office Use ONLY	DATE PAID &	METHOD OF	RENEWING
PAID \$ _____	INITIALS _____ 2019	PAYMENT _____	MEMBER _____