

Brock Recreation Center Membership Application

R-MC ID: _____

Name: _____

Address: _____

Phone: H: _____ C: _____ W: _____

Email: _____

Membership

Amount Paid: \$120 Waived

Dependents:

| <i>Name</i> | <i>Date of Birth</i> | <i>Relationship</i> |
|-------------|----------------------|---------------------|
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Immediate family members of students, faculty, and staff may use the facility. Each host is responsible for his/her guest and must remain with the guest at all times. Entry into the Brock Recreation Center is only allowed by a valid RMC ID card. It is a violation of college policy to use someone else's card or to swipe your card twice in order to let a friend enter.

I agree to the above rules and regulations.

Participation in any Brock Recreation Center activities and use of the recreational and workout facilities involves a risk of accidental injury. I acknowledge that all Brock Recreation Center facilities are used at my own risk. I will assume all risks to my dependents (Spouse/Children), guests, or myself that may occur during participation in any use of the facilities at Brock Recreation Center.

I have read and understand the above statement.

Signature

Date

Staff Approval

Date