

# Family Membership

EDEN CENTRAL SCHOOL DISTRICT

## Eden CSD Fitness Center

- Located to the right of the Eden MSHS Athletic Entrance
- 3150 Schoolview Road, Eden, New York 14057
- **Register at the District Office located at Elementary School**
  - **8289 N Main Street, Eden, 14057**
    - Separate entrance near handicap ramp
    - Please call ahead for registration, 992-3626

### Fitness Center Hours of Operation

Monday – Friday 5:00 pm – 9:30 pm

Saturday - 8:00 am – 12:00 pm

- *If EdenCSD is closed for weather related emergencies the Fitness Center will be closed. Please call ahead (992-3626), check our website: [edencsd.org](http://edencsd.org) or our Facebook page "Eden Central School".*

### *Membership fees are as follows:*

- *Individual (Eden CSD Resident)      \$15 month      six months      \$60.00*

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- *Family (Eden CSD Resident)      \$45 month      six months      \$180.00*
  - *3 interchangeable passes*
  - *Eden CSD students 16 and older      free– show student id*
  - *Under 16 must be accompanied by Fitness Center parent/guardian*

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- *Senior (Eden CSD Resident)      Free*
  - *62 years old and older*

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- *Non Resident of Eden CSD      \$30 month for Individual*

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- *Family (Non Resident of Eden)      \$90 month for family*
  - *3 interchangeable passes*

INFORMED CONSENT  
AND  
ASSUMPTION OF RISK AGREEMENT

As a condition of using the Eden Central School District's Fitness Center, I acknowledge that I have read this form, fully understand it, and agree to its terms and conditions.

1. I hereby acknowledge that I have completed the necessary paperwork for use of the Fitness Center equipment and participation in Fitness Center activities and returned to the district. I further acknowledge that I have consulted with my physician and attest that there are no ailments preventing participation in physical activity. I further understand that I will be solely responsible for monitoring the intensity of my use of the Fitness Center equipment and participation in its exercise activities, and will do so in a way which will not jeopardize my health, safety or physical well-being, or the health, safety or well-being of other Fitness Center users.
2. I understand that the nature of the supervision of the Fitness Center provided by the District is general in nature, and the Fitness Center Desk Attendant is not responsible for supervising or monitoring the manner or intensity of my use of equipment or participation in exercise activities.
3. I hereby acknowledge that my use of the District's Fitness Center involves risk including possible injuries to bones, muscles, tendons, ligaments, dehydration, abnormal blood pressure, fainting and heart disorders (including heart attacks). Based on the foregoing, I assume all risks associated with my use of the District's Fitness Center.
4. I hereby release the Eden Central School District and its Board of Education, in both their corporate and individual capacities, its employees, agents and assigns, for all claims (of any nature) relating to my use of the District's Fitness Center, including but not limited to claims for personal injury or death, and damage to or loss of personal equipment.

*Parents/Guardians: I acknowledge and accept the terms and conditions set forth above for Eden Central School District's Fitness Center.*

*(1)Parent Guardian Participant: \_\_\_\_\_*

*Print Name*

*(1)Parent Guardian Signature: \_\_\_\_\_*

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

(2)Parent Guardian Participant: \_\_\_\_\_

*Print Name*

(2)Parent Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*If user(s) is under 18 years of age the user's parent or guardian must sign this form as acknowledgement and acceptance of the terms and conditions set forth herein on behalf of the user(s).*

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

*Parent/Guardian please list all children you are registering for the Fitness Center and acknowledge (if they are under 18 years of age) that you have reviewed the Fitness Center Terms of Use with your children listed below.*

1 \_\_\_\_\_ Date \_\_\_\_\_

Please Print Child's name

2 \_\_\_\_\_ Date \_\_\_\_\_

Please Print Child's name

3 \_\_\_\_\_ Date \_\_\_\_\_

Please Print Child's name

4 \_\_\_\_\_ Date \_\_\_\_\_

Please Print Child's name

Each family member must complete the following registration form.

Please copy as needed.

**Eden CSD Fitness Center** 3150 Schoolview Road, Eden, New York 14057 📞716-992-3626

### Fitness Center Participant Information Form

*Students 16 and over may attend unaccompanied by parent/guardian with their school ID. Children under the age of 16 must be accompanied by a parent/guardian at all times while in the Fitness Center.*

The following form needs to be completed for each child.

PRINTED NAME:

\_\_\_\_\_

Last First Middle

ADDRESS:

\_\_\_\_\_

Street City Zip Code

PHONE:

\_\_\_\_\_

Home # Cell # (circle Parents or students)

Emergency Contact:

\_\_\_\_\_

Name Cell #

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_

Student Grade: \_\_\_\_\_ fall 2021

Child's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_