



CAMPUS RECREATION FACULTY/STAFF MEMBERSHIP APPLICATION

MEMBERSHIP TYPE:

New Membership Renewal

Put an 'X' on which membership type you are purchasing	3-month <small>Group fitness & climb sold separately</small>		6-month <small>Group fitness & climb included</small>		12-month <small>Group fitness & climb included (Except for comp. mem)</small>		Semester Pass*	
Faculty/Staff Individual	\$75.00		\$150.00		\$300.00		N/A	
Faculty/Staff Family	\$112.50		\$225.00		\$450.00		N/A	
UM Retiree Individual	\$75.00		\$150.00		\$300.00		N/A	
UM Retiree Family	\$112.50		\$225.00		\$450.00		N/A	
F/S Individual Group Fitness ONLY	N/A		N/A		N/A		\$50	
F/S Individual Pool ONLY	N/A		N/A		N/A		\$50	
F/S Individual Climb ONLY	N/A		N/A		N/A		\$50	
UM Retiree Individual Group Fitness ONLY	N/A		N/A		N/A		\$50	
UM Retiree Individual Pool ONLY	N/A		N/A		N/A		\$50	
UM Retiree Climb ONLY	N/A		N/A		N/A		\$50	
Comped Membership	N/A		N/A		\$0.00			
Comped Family Membership	N/A		N/A		\$150.00			
Group-Fitness Add-On <i>(3mon & comped only)</i>	\$20.00				\$20.00			
Climb Semester Add-On <i>(3mon & comped only)</i>	\$20.00				\$20.00			

*Cannot purchase online
*Payroll Deduction not available

PRIMARY ENROLLEE

Name (Last): _____ (First): _____ UM ID/Campus Recreation#: _____

Email: _____ Phone: _____ DOB: _____

Emergency Contact: _____ Phone: _____

FAMILY (SPOUSE AND/OR DEPENDENTS)

Name (Last): _____ (First): _____ Are you also a UM employee? _____

Email: _____ Phone: _____ DOB: _____

Campus Rec ID card needed? _____ UM ID/Campus Recreation # _____

Location for ID Pick-Up: South Campus Turner Center

DEPENDENTS *(Must be under the age of 23 & primary enrollee or spouse must be custodial guardian)*
Please review family membership policies on the reverse side.

Name: _____ Birthday: _____ Campus Rec ID card needed? _____ ID number _____

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**If membership has over 5 dependents, please see Member Services Representative to purchase*

PAYMENT:

Cash: _____ Check: _____ Visa/MasterCard: _____ *Payroll Deduction: _____ *(Must sign payroll authorization)*

Member Services will email a payment link once form has been submitted and processed if not purchasing through payroll deduction.

Member Services Staff Only

CR Staff Initials: _____

Amount Paid:	Payment Type:	Receipt/Order #:	Date Paid:	Total Members on Account:	Location sold:
Entered in DSE:	ID's Activated:	Expiration Date:	Activity Pass Adde (IML):	Added/Updated Member Spreadsheet:	
Additional Notes:			Emailed Follow-Up:	Membership totals:	Final Checked:

Place form in black box before filing EXCEPT for payroll deduction. Place payroll deduction form inside money box.

TERMS OF USE AND ASSUMPTION OF RISK AGREEMENT

The following must be properly signed by the Primary Enrollee before the membership will be approved by the Department of Campus Recreation. All information included in this application is true and complete. I have read the Campus Recreation policies (available at the Control Desk) and agree to the following:

ASSUMPTION OF RISK

Please be aware that the participation in physical activities involves a higher degree of risk than normal activities. Participation in recreation facilities and programs is at your own risk, and you are encouraged to have a physical examination prior to participating. The University of Mississippi and Campus Recreation does not carry any insurance program to cover participants. Participation in any Campus Recreation program is on a voluntary basis. The University of Mississippi and Campus Recreation cannot assume the responsibility for lost or stolen property or injuries sustained while participating.

UNIVERSITY OF MISSISSIPPI EMPLOYEE

I understand if my University employment terminates for any reason, my Campus Recreation membership will become invalid upon my termination date.

PARTICIPANT CONDUCT

Participants are expected to exhibit proper conduct and respect the rights of others. Individuals who engage in unacceptable, unsafe, or irresponsible behavior may have their access to the facilities revoked, modified and/or subjected to further University disciplinary action.

FAMILY MEMBERSHIP AGREEMENT

Family memberships can have up to five dependents on a membership. All spouse/dependents are required to have a Campus Recreation ID card. I understand that dependents ages 6 years of age and older are required to use a Campus Recreation ID card to gain access to the facility. I understand that a dependent must be at least 18 years of age to use the facility without parental supervision. Dependents age 16 or 17 may utilize all Campus Recreation activity and fitness spaces when accompanied by their sponsoring adult. An adult member must remain in the same activity area with children who are less than 15 years of age and use the designated family fitness spaces. Children 6 years of age and under may use the pool only if accompanied by an adult who must also be in the water. Children over the age of 5 may not use the locker room facility of the opposite gender.

LOCKER RENTAL POLICY

Yearly locker rentals run January 1st - December 31st and cost \$25/year. Semester locker rentals (for students, visiting scholars, and any other semester-members only) run from the beginning of the academic semester to the end of the academic semester and cost \$10/semester. Further expiration reminders may not be provided. Campus Recreation will clear locker contents after the expiration date. Unclaimed contents will be donated or disposed of any after 30 days. *Please note: locker rentals are non-refundable.*

ID POLICY

All Campus Recreation members are required to have an ID to access the facility over the age of 6. I understand I will use my faculty/staff ID card for facility access. I understand it is my responsibility to obtain a Campus Recreation ID card for additional members on my membership if they are not employed by the university. Members can receive an ID card with Member Services during office hours or emailing a photo to memberservices@olemiss.edu. Member Services will process the ID request and email members when the ID is ready to be picked up. I understand that I a receipt is valid for entry without an ID card for only two weeks after payment is submitted. Failure to submit an ID request and picking up ID's will result in suspension of membership.

PARKING

I understand I must purchase an appropriate parking decal through University Parking Services to park on campus. I will be responsible for any fines issued for parking improperly while utilizing this membership. Community members can purchase a Campus Recreation parking permit by receiving a parking permit request from member services during office hours.

REFUND POLICY

The Department of Campus Recreation requires submission of a completed Membership Cancellation Form in order for a membership to be cancelled and for a refund to be requested. A membership cancellation form will be sent electronically for signature to be processed for a cancellation/refund. Please email memberservices@olemiss.edu if you are inquiring about a cancellation or refund. *The membership will be considered cancelled on the last day of the month of the submission of this form.* A pro-rated amount will be refunded to the member requesting cancellation. You will be emailed a confirmation once your membership cancellation has been processed. The refund method is based on original form of payment:

- **Payroll Deduction:** If full membership amount has been deducted: refund will be processed for time not used. If full membership amount has not yet been deducted: will be deducted one final payment, then stop deductions. Allow 7 days for processing.
- **Cash or Check:** Will be refunded by check, sent to address indicated above. Allow up to 8 weeks to receive check.
- **Credit Card:** Will be refunded on credit card in Office 214 during business hours if paid **in-person**. If paid **online** via TouchNet: refund will be processed to the same payment method.

Primary Enrollee

Date

Campus Recreation Staff

Authorization for Payroll Deduction

(Faculty/Staff members only)

First Name

MI

Last Name

UM ID #

Are you a 9 month employee? _____ Yes* _____ No

**If Yes, please note that if you enroll during a period when you are off payroll (i.e. summer), your deductions will begin once you receive your first paycheck.*

I elect to pay my Campus Recreation membership dues purchased through the Department of Campus Recreation through the Payroll Deduction Plan. I understand the total cost of my membership is \$_____. I authorize the University to make deductions from my paycheck during the period allowed under this plan (15 consecutive payments). I understand that if I cancel my membership while I am still receiving deductions, a cancellation form needs to be submitted before my deductions will stop, and I will not receive any further refund. I understand that if I cancel my membership while I am no longer receiving deductions, I will receive a refund for the time not used.

Signature

Date

Expiration Date