



iROY SPORT

LAND OF DREAMERS

3444 Germantown Pike
Collegeville, PA 19426
610.631.2100
www.iroysport.com

PRIMARY MEMBER

Scan Card #: _____

Last Name: _____ First Name: _____

Date of Birth: _____

Phone: _____ Email: _____

Address: _____

City/State: _____ Zip: _____

Emergency Contact: _____ Phone: _____

MEMBER (FAMILY/COUPLE MEMBERSHIP ONLY) Scan Card #: _____

Last Name: _____ First Name: _____

Date of Birth: _____

Emergency Contact: _____ Phone: _____

CHILD 1 (FAMILY MEMBERSHIP ONLY) Scan Card #: _____

Last Name: _____ First Name: _____

Date of Birth: _____

Emergency Contact: _____ Phone: _____

CHILD 2 (FAMILY MEMBERSHIP ONLY) Scan Card #: _____

Last Name: _____ First Name: _____

Date of Birth: _____

Emergency Contact: _____ Phone: _____

MEMBERSHIP (30 DAYS NOTICE REQUIRED FOR CANCELLATION)

Student Membership: \$35/month

Individual Membership: \$45/month

Couple's Membership: \$85/month

Family Membership: \$109.99/month

Annual Equipment Maintenance Fee: \$65/annually
(Billed upon signup and annually in June thereafter)

iRoy Employees Only
Attach receipts here:

Added to Payeezy:

BILLING

Mastercard Visa

Discover Amex

Credit Card Number: _____

Expiration Date: _____

*Annual Equipment
Maintenance Fee: \$65*

First Month: _____

Total Received: _____

Start Date _____

Expiration Date: _____

iRoy Employee Only
Please Staple a Copy of
Driver's License Here

I request authorization for myself to use IroySports LLC. I acknowledge that use of the IroySports facility by me is expressly conditioned on my agreement to each of the terms of this document. I acknowledge and agree as follows:

1. Use of the IroySports LLC involves physical exercise, sport and recreational activities that may cause injury. I understand that there is an inherent risk of injury when choosing to participate in any physical exercise, sport, wellness, and/or recreational activities. My use of the IroySports Facility is a voluntary activity in all respects and I assume all the risks of injury and illness that may result from such use. This includes any sponsored group activities or individual use of the facility or exercise equipment. As a participant, I recognize and acknowledge these risks of possible physical injury and I agree to assume the full risk of any injuries (including death), damages, or loss which I may sustain as a result of participating in any and all activities arising out of, connected with, or in any way associated with my use of the IroySports Facility.
2. I, on my behalf of myself, do hereby fully release and discharge the IroySports Facility, and their agents, employees and the sponsors, and those whose facilities are being used for this program(collectively, the "Released Parties") from any and all liability, claims, and causes of action from injuries or illness(including death), damages or loss which I may have or which may occur to me on account of participation in all activities utilizing the facility. This is a complete and irrevocable release and waiver of liability. Specifically, and without limitation, I, on behalf of myself, covenant not to sue the Released Parties for any alleged liabilities, claims, or causes of action released hereunder.
3. I further agree to indemnify and hold harmless and defend the Released Parties from any and all claims resulting from injuries and illness (including death, damages, or loss, including but not limited to attorney's fees, sustained by me arising out of, connected with, or in any way associated with, the IroySports Gym.
4. In the event of any emergency, I authorize the Released Parties to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered.
5. I certify that I am in good health and sufficient physical condition to properly use the IroySports Facility; that I am knowledgeable about the proper use of any equipment that I will use and the rules of any activities that I will participate in; and that I will carefully read the operating instructions for any IroySports Facility equipment prior to use and will operate such equipment in strict accordance with instructions.
6. The Released Parties are not responsible for any loss or theft of personal property brought to or left in the IroySports Facility and I release the IroySports LLC from any liability for such loss or theft.

7. **POLICIES**

Cancelations: I understand that I will be billed each month unless a 30 day written notice to cancel has been given and signed off by an iRoySports Staff Member. The cancellation will become effective following the 30-day notice.

Equipment/Maintenance Fee: I understand there will be a \$65 maintenance/equipment fee charged when I sign up for a membership and every year thereafter.

Barcode Check-In Tags: I understand that I will be issued a barcode tag when I sign up for a membership. It is my responsibility to scan this tag upon entering iRoySports. If this tag is lost or stolen, I understand there is a \$5 replacement charge for a new tag. These tags are non-transferable and only to be used by active members.

I have read and fully understand the Acknowledgement and Release of Liability set forth above, including the permission to secure medical treatment and the release of all claims, including claims for the negligence of the Released Parties. I am 18 years old or older. I understand that my signed waiver will be retained in an IroySports members file. This document is binding upon me and my heirs, children, wards, personal representatives and anyone entitled to act on my behalf.

INITIALS

Primary Member Signature: _____ Date: _____

Member Signature: _____ Date: _____

Child 1 Signature: _____ Date: _____

Child 2 Signature: _____ Date: _____