

Lake Forest Fitness Center Fitness Membership

| N | lew | Mem | ber |
|---|-----|-------|------|
| | Reg | istra | tion |
| | | | or |
| | | Rene | wal |

400 Hastings Road. Lake Forest. Illinois 60045 Tel. 847.810.3932 www.lfrec.com

| | 400 Hastings | ROAG. LAKE FOIEST. II | 1111015 60045 | 161. 847.810.35 | 32 www.iirec.com | | |
|--|--|--|--|---|---|--|-----------|
| Name: (Primary Membe | r) | | Home Tele | ephone #: | | | |
| Address: | | | Mol | oile: | | | |
| City: | | | State | /Zip | | | |
| Birthdate: | | | Email A | ddress: | | | |
| Emergency Co | ontact Name: | | Em | ergency Cont | act Phone # | | |
| List all additio | nal individuals | included in this m | embership be | elow: | | | |
| | Fir | st & Last Name (s | 5) | | Birthdate | Gender | |
| | | | | | | М | F |
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| MEMBERSHII | bilities Act. Please contact | <u>N</u> | | members require spec | cial medical assistance or have sp | pecial needs. | |
| Step 1: | Resident | Non-Reside | | | | | |
| Step 2: | Individual | | • | Matinee | | | |
| | Student | Senior | | nior Couple | | | |
| Step 3: *Annual Membersh relocation with writ notification of cancer | Annual/Pay in Fuips with Monthly EFT tten verification. After Ellation has been receiv | Ann are not eligible for cancel completion of the initial 1 yed. The Monthly EFT is o | ual w/ Monthl lation or refund du 12 months, the mer only available for A | ring the intial 12 n ıbership payments | Month to Mor nonths unless for reasons of will automatically continue s. | nth fmedical disal e until written | pility or |
| Step 4: | Cash | Check # | Vis | ia N | Nastercard | Discover | |
| Step 5: | Enrollment Fee: | \$50.00 (new members of | only) Mo | embership Fee | s Paid \$ | _ | |
| Student - Any indi Couple - Defined a Family - Defined a same household a Senior - Adults wh Senior Couple - To | ividual within the ago as two married adults as adult(s) and unmar re NOT included in th no are 65 years and o wo adults who are 65 | ne family membership. Ider | f age outh residing in t 3) residing with g | ne same househo uardians. Youth ac | | r relatives livii | ng in the |
| Member Sig | nature: | | | | Date: | | |
| | | | | | Dute | | |
| Staff Initials | : | | | | | | |