## PAYROLL DEDUCTION MEMBERSHIP APPLICATION

CLUB 1 FITNESS 3806 BROADWAY GREAT BEND, KS 67530 (620)-792-1366

Company			Phone #  Employee #			
						Membership Type:
□ Single \$39.00 Ded		Deduction	eduction: \$19.50 Semi-Monthly, \$9.75 Weekly			
□ Family \$51.00 De		Deductio	Deduction: \$25.50 Semi-Monthly, \$12.75 Weekly			
UCT (Unlimited Court Time)		Deductio	<b>Deduction:</b> \$22.00 Single/month, \$27.00 family/month			
•	Wi thout UTC Raqu	ette ball is \$5/h	rand Tennis is \$8/h	•	e g	
18 or full time without any a member per n  Membership Fee	college students dditional cost. Ar nonth.  Enclosed (\$30)	up to age 23.  ny member ac	Family Members dded after four w	ships can ha ill be an add	living at home up to age ave up to four members ditional \$2.00 per	
Referred by:			-			
Salesperson	Starting Date	Starting Date		□ ист	Membership #	
1. Last Name First Name			2. Spouse Name			
Employee: SSN Date of Birth			Spouse: SSN Date of Birth			
Address City		State Zip Telephone		Telephone		
E-mail Address			Cell			
Employer			Spouse's Employer			
Children Participating Relationship 3.		Age	Age Birthday			
4.				5		
5.						
6.				<del></del>		
7.						
I HEREBY AUTHORIZE THE ABLADVANCE PAYMENT OF MY MO AGREE TO THE FOLLOWING Requirement is six (6) months regardless of my resignation, temployment with this company. Writing, and that, once terminate to rejoin. I understand that a 30 my cancellation is complete. I will take full respondancel my membership through before I can rejoin	OCLUB 1 FITNESS tand that the mini e to fulfill this mine, or any other interement will remain ranother initial me I am liable for ALI participation is at a lis incurred in case	FOR MEMBERSHIP AND mum membership amum requirement cruption in my in effect until revoked in embership fee of \$30.00 L bills incurred before my own risk, and e of an accident. If I	Bookkeeping Information           Membership Fee         \$30.00           Dues         \$           Extra x \$2.00         \$           Total         \$           Check# Cash CC			
			Date	Receipt #_		