



**PARTICIPATION AGREEMENT**

YMCA AT PABST FARMS  
1750 E. Valley Road, Oconomowoc, WI 53066  
262-567-7251, pabstfarmsmemberservices@glcymca.org

WATERTOWN AREA YMCA  
415 South Eighth St., Watertown, WI 53094  
920-262-8555, watertownmemberservices@glcymca.org

MEMBER ID # \_\_\_\_\_

**PRIMARY PARTICIPANT/MEMBER NAME**

First \_\_\_\_\_ Last \_\_\_\_\_ M.I. \_\_\_\_\_ D.O.B. \_\_\_\_\_ Male / Female  
Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ E-mail \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**EMERGENCY CONTACT**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**MISSION & INCLUSION**

**YMCA MISSION:** To put Christian principles into practice through programs that build healthy spirit, mind and body for all.  
\_\_\_\_\_(Initial) As a member/program participant of the Association, I agree to cooperate with the YMCA's mission and Code of Conduct. I recognize that YMCA memberships and programs embrace all types of members and that the Y has a commitment to both the value and practice of diversity.

**PHOTO/TALENT RELEASE**

**YES / NO (circle one)** I hereby irrevocably release, consent and allow the YMCA AT PABST FARMS and the WATERTOWN AREA YMCA and its agents to use my or my family members' photograph/likeness/voice, as it pertains to my participation with the YMCA, in any manner for promotional efforts without expectation of any reimbursement in connection with its use.

**NOTICE OF SEX OFFENDER SCREENING**

The YMCA conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the YMCA reserves the right to cancel membership, end program participation, and remove visitation access.

**EMPLOYER**

Company Name: \_\_\_\_\_ Company Phone: \_\_\_\_\_

**FAMILY INFORMATION & DEMOGRAPHICS**

**HOUSEHOLD INCOME**  
 Under \$15,000     \$15,000-\$24,999     \$25,000-\$34,999     \$35,000-\$49,999     \$50,000-\$74,999  
 \$75,000-\$99,999     \$100,000-\$149,999     \$150,000-\$249,999     \$250,000+

**ETHNIC BACKGROUND (Please use number codes below where applicable)**  
1 American Indian or Alaska Native, 2 Asian/Pacific Islander, 3 Black/African American, 4 Caucasian, 5 Hispanic/Latino, 6 Other

NAME (LAST, IF DIFFERENT)	BIRTHDATE	GENDER	RELATIONSHIP TO PRIMARY	ETHNIC CODE (OPTIONAL)
	/ /	M F		
	/ /	M F		
	/ /	M F		
	/ /	M F		
	/ /	M F		
	/ /	M F		
	/ /	M F		

PRIMARY SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_