



Village of Pinecrest Community Center Membership Contract

5855 SW 111th Street
Pinecrest, FL 33156
www.pinecrest-fl.gov

Telephone: (305) 284-0900
Fax: (305) 284-0904
e-mail: parks@pinecrest-fl.gov

Household Information

Head of Household: _____

Mailing Address: _____
(city) (state) (zip)

E-mail Address: _____ Date of Birth: _____

Home Phone #: _____ Cell Phone #: _____ Work Phone #: _____

Emergency Contact: _____ Phone #: _____

Other Family Members (If Applicable)

Name	Relationship	DOB	Sex

Members Code of Conduct

I agree to abide by all Community Center rules, regulations and procedures. Violations may result in revocation of my membership privileges. I also accept full responsibility for my household members and guests. All statements are true to the best of my knowledge.

Member's Signature

Date

Membership Fees

Includes discounts to classes & access to the fitness center.

	<u>Resident</u>	<u>Non-Resident</u>
Individual Adult (18-64)	\$390	\$490
Individual Senior (65+)	\$225	\$280
Family*	\$705	\$880

Memberships purchased by September 30th, 2008, shall receive a one time discount of 25% off regular rates.

*no limit to number of persons, but they all must live at the same address – documentation required; Children ages 12-14 must be accompanied by an adult inside the fitness center; 11 and under are not permitted inside the fitness center.
All memberships subject to 7% sales tax.

Staff Use Only

Membership Category: _____ Type of Membership: _____ Res. _____ Non-Res.

Amount Paid: \$ _____ Payment Method: _____
(check #) (cash) Mastercard/Visa/Amex/Disc.
(circle one)

Proof of Residency: _____ ****Must reside in the Village of Pinecrest****
(FL Driver's License, FL Identification Card, Passport, Voter's Registration, Library Card, Electric/Phone/Utility Bill, Mortgage/Deed, Lease)

Household ID #: _____ Receipt #: _____

Employee Signature: _____ Date: _____