



East Hall Community Center
 3911 P. Davison Rd. Gainesville, GA 30507
 Phone: (678) 450-1540
 Fax: (678) 450-1562

East Hall Fitness Center Membership Agreement

Membership Type:	Monthly	Annual
(Check one)		

Check one:

Individual	Student	Adult (60+)

Date: _____
Member Name: First _____ Last _____
Address: _____
City: _____ **State:** _____ **Zip Code:** _____
Birth Date: _____ **Age:** _____
Home Number: _____ **Cell Number:** _____
Email Address: _____

Has physician approved use of Cardio & Strength equipment? **Yes** **No**

Emergency Contact:

Name: _____ **Home Number:** _____
Cell Number: _____

Member shall hold harmless Hall County, its agents, employees, and public officials from and against any and all claims, damages, losses and liabilities whatsoever in nature, cause of origin, and whether or not attributable to the negligence of Member, its agents, contracts or employees or the use of occupancy of the designated facility or any other portion of Hall County Parks and Leisure Services by Member, its agents, employees and invitees.

Member Signature: _____ **Date:** _____

Facility Personnel: _____ **Date:** _____

This EHCC Membership Agreement, when signed by the applicant and accepted by EHCC, constitutes a binding document between EHCC and the individual or entity executing the signature page of this Agreement. Membership rights, privileges and obligations commence when the Agreement is signed by both parties.

No food or gum is permitted. Closed, plastic beverage containers are permitted. Cell phones are not permitted in the fitness center. Failure to comply with these policies will result in immediate removal from the facility and possible further disciplinary actions.

Member ID #: _____	PAID: Cash _____
	Check _____
	Credit Card _____
Amount Paid: \$ _____	Employee _____