

Palestra Health Club Summer Membership Application

Full Name:	Date of Birth:
School & Class Year:	
Personal Information	
City, State & Zip Home Phone Permanent Email Address	Cell Phone
Social Security Number _	
Rates	
(Membership) (Available to current full-time Ur Summer Palestra membership is for full-time under graduating class of 2016 is not eligible for this mer is subject to availability - sign up early. Palestra St is limited to the Palestra Fitness Center facility and business center, overnight rooms, dining, banquet Graduate students and those over the age of 21 m the rest of the clubhouse facilities and its services	ugust 31, 2016: \$90 (plus sales tax) o is non-refundable and non-transferable) niversity of Pennsylvania and affiliate school students only - College ID required) ergraduate students at the UPENN and affiliate schools during the summer. The mbership. This option is available for those who are not 21 years of age yet, and ummer Members are not full Penn Club members. As such, access d the locker rooms only. The squash courts at the Yale Club, Penn Club events, t facilities and reciprocal clubs are not open to Palestra Summer Members. Inay join The Penn Club as either full members or Summer Members to utilize Inay including participating in events. Summer Memberships are available to current mess to the squash courts at The Yale Club, events, and all club privileges. pennclubny.org for more information.
Payment Information	
(Payment must be submitted with app □ American Express □ MasterC	olication) card □ Visa □ Check NoAmount <u>\$97.99</u>
Credit Card Number	Exp Date/
Signature	/Date/
Please fax (use a dark pen) co	mpleted application and release form to 212-403-6616.

Informed Consent Release Form

Please read and sign the following:

I, the undersigned, wish to use the Palestra at The Penn Club, managed by Plus One Health Management, Inc. ("Plus One"), and I understand that the use of the Palestra is at my own risk.

I also understand there exists the possibility of certain changes occurring during exercise. They include abnormal blood pressure, rapid or slow heart beat, and in certain instances cardiac complications.

I agree that The Penn Club and Plus One shall not be liable or responsible for any injuries to me or changes in my physical condition resulting from my use of the Palestra during my exercise session.

I expressly release and discharge The Penn Club and Plus One and their principals, employees, agents and assigns from all claims, actions, and judgments which I or my heirs, executors, administrators and assigns may have or claim to have against The Penn Club and Plus One and / or their principals, employees, agents and assigns, for all injuries or other damage which may result from my use of the facility. This release shall be binding upon me, my heirs, executors, administrators and assigns.

The Penn Club and Plus One shall not be liable for the disappearance, loss or theft of, or damage to my personal property including money, negotiable securities, furs or jewelry even though such property may be lost, disappear, stolen, or damaged while stored in lockers located within the Palestra.

I have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance. This release shall apply to all my visits to the Palestra.

Name:	Member Number :
Signature :	Date :
The Palestra is able to provide you with a free subscinternet newsletter:	cription to the popular "Better Letter" wellnes
Enter your e mail address here:	texthtml
I would like to receive other health and fitness information	on: Check one: Yes No