



Date

MEMBERSHIP AGREEMENT

Name	Home Phone
Mailing Address	Cell Phone
City, State	Email
ZIP	Birthdate
How did you hear about us?	Emergency Contact and Phone

FOR JOINT AND FAMILY MEMBERSHIPS ONLY

Family Member	Relation and Birthday
Family Member	Relation and Birthday
Family Member	Relation and Birthday
Family Member	Relation and Birthday
Family Member	Relation and Birthday

All memberships must be set up on an Auto-Pay system using a bank card or credit card unless paying for the entire contract up front. (The shortest contracts we are able to set up are for three months for those paying up front.)

AUTHORIZATION FOR AUTO-PAY

I authorize Edwardsburg Fitness Co. to draw items (checks, electronic fund transfers, charge card) for the purpose of paying the membership dues including any late fees or service fees, as well as other purchases I authorize, on the account listed below.

Bank Account

Routing Number (9 Digits)	Account Number	Institution
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Credit Card

Type of Credit Card	Last 4 Digits
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Debit Card

Type of Card	Last 4 Digits
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Signature

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