

MEMBERSHIP

A P P L I C A T I O N

PO BOX 153, Cleve SA 5640
gymworkscleve@hotmail.com

NAME

FIRST NAME

LAST NAME

ADDRESS

STREET ADDRESS

TOWN / CITY

STATE

POSTCODE

EMAIL

MOBILE NUMBER

DATE OF BIRTH

EMERGENCY CONTACT

FULL NAME

MOBILE NUMBER

ADDITIONAL CONTACT DETAILS

MEMBERSHIP

CONDITIONS

Please read and sign the below. Membership applications will be considered incomplete without this section.

- You attend at your own risk and leisure
- This is a community gym and therefore unstaffed
- The GymWorks Cleve Committee and Cleve Sporting Bodies Club Inc. is not liable for any injury as a result of your attendance
- Prior health concerns should be addressed and cleared with your relevant health professional
- A Defibrillator is located on the outside of the Gym building by the entry
- A First Aid Kit is located inside the Gym building by the message board
- Vandalism, disrespect and bullying will not be tolerated and will result in instant membership cancellation
- Each entry code is unique and allocated to one person. Your code is not to be shared with others to gain entry
- Students aged 14-16 years MUST be accompanied by an adult
- Children in the gym must be supervised and are not to use any equipment under any circumstance
- Membership expiry reminders will not be sent
- Membership renewal is your responsibility
- If your membership expires, your access code will automatically deactivated and will not reactivate until full payment is received
- Memberships are non-refundable and non-transferrable
- Concerns, queries and questions can be directed to the GymWorks Cleve Committee.

FULL NAME

SIGNATURE

DATE

By signing, you agree to the above mentioned membership conditions and hereby release GymWorks Cleve and Cleve Sporting Bodies Club Inc. of any liability resulting in your attendance of this facility.

COMMITTEE CONTACTS

NAME

Georgie Nagel

PRESIDENT

Ben Shannon

SECRETARY

Elliott Claxton

TREASURER

Amy Allen

CLEVE SPORTING BODIES REPRESENTATIVE

Bess Winkley

CLEVE SPORTING BODIES REPRESENTATIVE

Natasha Agars

NUMBER

0432 781 012

0427 992 986

0429 461 427

0408 858 725

0400 646 375

Brett Bray

Please note: this is a volunteer committee and queries and concerns will be addressed in due course. Please allow up to 72 hours for a response.

Email: gymworkscleve@hotmail.com

Facebook: [@gymworkscleve](https://www.facebook.com/gymworkscleve)

MEMBERSHIP FEES & PAYMENTS

ACCOUNT NAME

Cleve Sporting Bodies

ACCOUNT NUMBER

162990311

BSB NUMBER

633 000

REFERENCE

YOUR FULL NAME

FEES

12 months - General

\$150.00

12 months - Pensioner

\$100.00

12 months - Student

\$100.00

6 months

\$75.00

Weekly

\$25.00

Casual

\$10.00 per visit