

PRE PAY MEMBERSHIP FORM

New Renewing Member Details Checked

MEMBERS DETAILS:

Full Name:

Address: Post Code:

Town: Email:

Phone: Home:() _____ Cell:() _____ Work:() _____

D.O.B: Gender: Male / Female

Emergency Contact Name: _____ Phone:() _____

MEMBERSHIPS (Tick One)

Pools Indoor Rockwall Fitness Studio Aquatic Programs

3 Months 6 Months 12 Months

Adult Student Senior Child Family**

PAYMENT DETAILS

Total Paid: \$

Cash EFTPOS Credit Card Cheque Membership Expiry Date: ____/____/____

FAMILY MEMBERS:

Name: _____	Name: _____	Name: _____	Name: _____
_____	_____	_____	_____
D.O.B: ____/____/____	D.O.B: ____/____/____	D.O.B: ____/____/____	D.O.B: ____/____/____
M / F # _____	M / F # _____	M / F # _____	M / F # _____

1. Payment & Fees

The Member agrees to pay

- (a) The Member agrees to pay the membership fee and any other fee that is required upon signing the Contract. Upon payment of those fees, the Member will have the non-exclusive right to use the facilities of AC Baths/Taupō Events Centre for a period of (3/6/12) months (the membership term) during the facilities' public open hours of operation (as updated from time to time by ACB/TEC, including as a result of events being staged at the Taupō Events Centre). The member agrees that, when using the facilities, he or she must comply with all ACB/TEC policies/rules relating to the use of facilities, as updated from time to time by ACB/TEC. The Member's membership may be renewed at the expiry of the membership term by the Member paying the then applicable membership fee. If the Member renews his/her membership, this contract applies to that renewed membership term.
- (b) A Member must present his/her membership card for admittance to the facility. Admittance may be refused if a member fails to provide his/her membership card on request by staff. A fee will be charged to replace membership cards lost or stolen.

2. Membership processing

Completed applications forms with ALL required information and allow photo ID to be recorded on membership database should you wish to commence your membership.

3. Privacy

- When the Member provides personal information to Taupō District Council, we will comply with the New Zealand Privacy Act 1993.
- The Member authorises Taupō District Council to use his or her personal information for purposes of enforcing this Contract and for providing special product and service offerings to the member.
- The Member has right to access and request correction of, all personal information that Taupō District Council holds about him or her.

4. Membership Suspension

- The Member may suspend their membership upon giving 2 weeks written notice to AC Baths/Taupō Events Centre, provided a minimum of 10 days but not exceeding 30 days on a 6 month membership and not exceeding 90 days on a 12 month membership in total is requested.
- Suspensions for medical reasons will be extended to the date issued on a Doctor's Medical Certificate as produced (copy to be held on file).
- No suspension is available in the first 3 months of the Membership Term.

5. Termination of Membership by Member

- The Member may terminate this Contract before the expiry of a membership term provided all amounts owing under this Contract (including, to avoid doubt, the relevant membership fee for that term) are paid in full. There are no cancellations fees.

6. Termination by Taupō District Council

AC Baths/Taupō Events Centre may terminate the Member's membership if he or she fails to:

- Comply with this contract; and/or
- Comply with ACB/TEC policies and rules relating to the use of facilities (as they are updated from time to time), copies of which are available on request.

7. Transfer of Membership

All memberships are non-transferable.

8. Limitation of Liability

Except as provided in the Consumer Guarantees Act 1993 or as provided elsewhere in this Contract, Taupō District Council, to the extent permitted by law, shall not be liable or responsible to the Member for any direct or indirect or consequential injury, loss or damage to the person or property of the Member, whatsoever and howsoever arising.

9. Unavailability of facility or services

I agree to accept the fact that a particular facility or service within ACB/TEC premises may be unavailable at any particular time due to a prior booking, scheduled maintenance closure, mechanical breakdown, fire, act of god, condemnation, catastrophe, or any other reason. Further I agree to not hold Taupō District Council responsible or liable for such circumstances.

10. Conduct within the AC Baths/Taupō Events Centre

Management reserve the right to refuse entry, cancel a membership or request a member to leave the premises if the member does not behave in a responsible manner, is under the influence of drugs and/or alcohol or does not adhere to the conditions of use.

11. Legally Binding Agreement

I understand that this agreement is legally binding whether my use of the Taupō District Council venues and its services is determined and paid. I understand my membership must remain current in order to use the facilities. I acknowledge that increases in periodic payments may occur, however members will be given no less than 60 days written notice of any changes to conditions or fees.

DECLARATION:

I declare that the information contained in this Membership Payment Contract is true and correct and I agree to be bound by the terms and conditions outlined above, on the reverse of this contract and rules/policies of this facility. The Membership Terms and Conditions (Contract) constitute the entire agreement, understanding and arrangement between me (the Member) and Taupō District Council, AC Baths/ Taupō Events Centre, and cancels and supersedes any previous agreement between the parties whether oral or written. This Contract also includes all associated documentation, including membership fee and payment information. If for any reason I fail to use the facilities of ACB/TEC and or take advantage of the benefits offered, I agree that I am no way relieved of full payment of any and all the fees under this Contract and associated documentation.

Signed by Member: _____ Date: ____/____/____

Signed by Staff Member: _____ Date: ____/____/____

Your safety is your responsibility. We strongly recommend you seek the advice of your doctor for his or her clearance to exercise prior to using the facilities. If you have any health condition/s that may affect your safety or the safety of other people, it is your responsibility to bring this to our attention so we are in the best possible position to offer assistance if necessary.