



100 Plank Road
P. O. Box 312
St Joseph, Louisiana 71366
(985) 974- 5935
plankfitnessla@gmail.com

MEMBERSHIP CONTRACT

Member Name: _____

Address: _____

Date of Birth: _____ M/F Primary Phone: _____

Secondary Phone: _____ Email Address: _____

The undersigned individual, hereby indicates their desire to become a member of Plank Fitness, LLC, pursuant to the terms and conditions of this gym membership agreement.

HEALTH ATTESTATION

The Member attests that they are fully able to participate in an exercise regimen of their design or choosing without undue risk.

MEMBER ACCESS

This gym membership agreement entitles the member to access Plank Fitness, LLC facility so long as all dues are paid current.

PERSONAL & GROUP TRAINING

Personal training and fitness classes MAY be offered by the gym, but are not included in the Member's membership dues. Plank Fitness, LLC reserves the right to demand additional fees for any personal or group training that the member chooses to participate in.

GYM RULES & PARTICIPATION

The Member hereby agrees to abide by all posted safety guidelines and regulations while using Plank Fitness, LLC facility and equipment. Additionally, the Member agrees to dress and conduct themselves in a manner deemed appropriate for a fitness facility. The Member shall not consume drugs, alcohol, or tobacco products on Plank Fitness, LLC property.

INDEMNIFICATION

This gym membership serves as a liability release, pursuant to which the Member agrees to indemnify and hold Plank Fitness, LLC harmless against any and all claims of loss or damage without limitation

GYM MEMBERSHIP CANCELLATION

This gym membership may be cancelled by providing written notice, in person, at Plank Fitness, LLC. If the gym membership contract is cancelled prior to contract expiration date, the Member agrees to pay a cancellation fee of one (1) month's membership dues. If the Member must cancel this gym membership contract due to military service or relocation to an area more than 25 miles from Plank Fitness, LLC facility, the Member may cancel without paying the cancellation fee.

BINDING LAW

This gym membership contract shall be considered binding upon the Member and Plank Fitness, LLC, and shall be upheld and enforced in accordance with the laws of Louisiana. Any legal proceedings related to this gym membership contract shall take place in courts located in Tensas Parish, Louisiana.

ACCEPTANCE

The below signed parties hereby enter into this gym membership contract with one another in acknowledgement and acceptance of the terms listed above.

Member Signature

Plank Fitness, LLC Authorized Representative



100 Plank Road
P. O. Box 312
St Joseph, Louisiana 71366
(985) 974- 5935
plankfitnessla@gmail.com

MONTHLY MEMBERSHIP DUES

ALL MEMBERSHIP RATES INCLUDE STATE AND LOCAL SALES TAX

Initial one (1)

- _____ \$50 per person with a six (6) month commitment
- _____ \$50 per person with a three (3) month commitment
FOR NON-RESIDENTS of Tensas Parish
- _____ \$85 for a "family" of two (2) with a six (6) month commitment
- _____ \$125 for a "family" of three (3) with a six (6) month commitment
- _____ \$150 for a "family" of four (4) with a six (6) month commitment

Payment Form Check Cash VENMO ACH:

_____ Name

_____ Name of Family Member

_____ Name of Family Member

_____ Name of Family Member

_____ Date

ALL MINORS SHOULD BE ACCOMPANIED BY AN ADULT



100 Plank Road
P. O. Box 312
St Joseph, Louisiana 71366
(985) 974- 5935
plankfitnessla@gmail.com

DEBIT AUTHORIZATION

AUTHORIZATION AGREEMENT FOR AUTHORIZED PAYMENTS

I hereby authorize Plank Fitness, LLC to debit my checking account and bank named below.

Bank Name

City

State

Zip Code

Routing # (*Numbers at bottom on left*)

Account # (*Numbers at bottom in middle*)

By signing below, you are giving Plank Fitness, LLC, permission to debit funds from your account on a monthly basis (first, 1st, of each month) for membership dues. This authority is to remain in full force and effect until Plank Fitness, LLC receives written notice that a membership is wanting to be cancelled; ample time is required/needed so that your bank may be contacted.

Name (*please print*)

Name (*please sign*)

E-mail Address

Date

Plank Fitness, LLC Authorized Representative

*All account information will remain confidential and used only for the payment of monthly membership dues.
"This institution is an equal opportunity provider."*

Please attach a voided check.



100 Plank Road
P. O. Box 312
St Joseph, Louisiana 71366
(985) 974- 5935
plankfitnessla@gmail.com

RELEASE AND WAIVER

This release executed on _____ by _____, of _____, to Plank Fitness, LLC organized under the laws of the State of Louisiana, having its principal address at 3699 Highway 605, St. Joseph, Louisiana 71366 and the employees, officers, board members or any person in any way related to Plank Fitness LLC as it pertains to athletic activities.

In consideration of being permitted to exercise or participate in any type of exercise or athletic activity, the undersigned, for himself or herself, or his or her children, heirs and next of kin, acknowledges, agrees and represents that he or she by participating in any athletic or exercise activity constitutes an acknowledgement that he or she has inspected all such areas of activity and that he or she finds and accepts the same as being safe and reasonably suited for the purposes of its use. The undersigned further agrees and warrants that he or she has inspected all equipment and that it is satisfactory and safe, whether said equipment has been purchased by the undersigned, whether said equipment has been furnished by Plank Fitness, LLC or has been provided by any other person or parties.

The undersigned releases, waives, discharges, and covenants not to sue Plank Fitness, LLA or any of its employees, officers, owner, administrators, coaches, whether voluntary or retained by Plank Fitness, LLC in connection with the exercise or athletic activity and each of them their officers and employees, all of whom for the purposes of this release are referred to as "releasees", from all liability to the undersigned and the undersigned's personal representative, assigns, heirs, and next of kin, child or children for any and all damage, or any claim demands for the same on account of injury to the person or property of the undersigned or resulting in the death of the undersigned, or any of the individuals identified above, whether caused by the negligence of the releasees or otherwise, in observing or participating in any exercise or athletic event.

The undersigned agrees to indemnify and save and hold harmless the releasees and each of them from any loss, liability, damage or cost they might incur due to any event or loss whether caused by the negligence of the releasees or otherwise.

The undersigned assumes full responsibility for and risk of bodily injury, or death or property damage due to the negligence of releasees, otherwise while in or on any area owned by Plank Fitness, LLC where exercise or athletic activity may be taking place.

The undersigned acknowledges and agrees that the activities of the above described events are dangerous and involve the risk or serious injury or death. The undersigned further agrees that the foregoing Release, Waiver, and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Louisiana and that if any portion of this agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The undersigned has read and voluntarily signs the release and waiver of liability and indemnity agreement, and further agrees that no oral representations, statement, or inducements apart from the foregoing written agreement have been made.

Date: _____

Print Name: _____

Parent/Guardian: _____

IF UNDER 18 YEARS OF AGE, SIGNATURE OF PARENT/GUARDIAN IS REQUIRED.

Signature: _____

Plank Fitness, LLC

Authorized Representative



100 Plank Road
P. O. Box 312
St Joseph, Louisiana 71366
(985) 974- 5935
plankfitnessla@gmail.com

PARENT/GUARDIAN WAIVER AND RELEASE FORM

You agree that you are aware that the minor named below will be engaging in physical exercise involving various pieces of equipment and general fitness training, which could cause injury to him or her.

You understand that the minor is voluntarily participating in these activities and is assuming all risk of injury that may result from engaging in any exercise, exercise program, use of any and all equipment, or any related event.

You hereby agree to waive any all claims or right that you might otherwise have to sue Plank Fitness, LLC the facility, owners, or agents for any injury that might occur. You understand that we will make an evaluation or recommendation as to whether or not the minor is capable or deemed physically fit to engage in any activity associated with Plank Fitness. If the minor has any physical or mental condition that may impair his or her ability to engage in any of the activities or use of any and all equipment, it is your responsibility to obtain a physician's release statement. It is recommended that you consult a physician prior to the minor participating in any physical exercise regime or program.

Minor's Name: _____ **Date:** _____

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

Emergency Contact: _____

Telephone Number: _____

My child has known medical conditions: YES _____ **NO** _____