



MCCC FITNESS CENTER AND POOL MEMBERSHIP REGISTRATION FORM

DATE: _____

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ DATE OF BIRTH: _____

REGULAR RATES

Individual Recreational Swim and Fitness Center combined (age 18 to 64)	\$35.00/month or pay \$400.00/year
Individual Pool (age 18 to 64)	\$20.00/month or \$200.00/year
Individual Fitness Center (age 18 to 64)	\$20.00/month or \$200.00/year
Family Pool (up to two parents and three minor children)	\$25.00/month or \$285.00/year

SPECIAL RATES*

Individual Recreational Swim and Fitness Center combined*	\$30.00/Month per individual or \$350.00/year
Individual Pool	\$16.00/Month or \$175.00/year
Individual Fitness Center	\$16.00/Month or \$175.00/year
Non-MCCC Visiting College Student	\$16.00/ Summer or Winter

***Special Rates include:**

MCCC alumni (person must have completed 30+ credits at the college), senior citizens (age 65+) and non-MCCC visiting college students with student I.D and proof of enrollment.

PAYMENT METHOD:

Credit Card# _____ Amount: _____

Expiration Date: _____ CVV#: _____

Signature: _____

I understand that my membership will start on the first day of the month and will be billed on a recurring monthly or annual basis. I may cancel my membership up until the day before the next scheduled payment in order to NOT be charged. Signature: _____