

Schenectady JCC Teen Membership Application

Teen Member

Please print clearly

First Name _____ Last Name _____
Gender _____ Date of Birth ____/____/_____
Address _____ City/State/Zip Code _____
Home Phone (____) _____ Cell Phone (____) _____
Email Address _____
Emergency Contact Name _____ Relationship _____
Emergency Contact Phone (____) _____
Jewish: Yes No Synagogue: _____

Adult Accepting Responsibility ***(Required for Individuals 17 and Under)**

First Name _____ Last Name _____
Gender _____ Date of Birth ____/____/_____
Home Phone (____) _____ Cell Phone (____) _____
Email Address _____
Employer _____ Occupation _____
Business Phone (____) _____
Jewish: Yes No Synagogue: _____

How did you hear about Schenectady JCC? Please check all that apply.

Friend SJCC website Other website Internet Search Doctor referral Place of employment
 Drive by/Live in the area Newspaper/magazine Yellow pages Other _____

Did a SJCC member refer you to us? No Yes; name _____

Check your reason(s) for joining Schenectady JCC. Please check all that apply.

Fitness Center Group Fitness Classes Indoor Cycling
 Youth Sports Leagues JCC Maccabi Games Indoor Pool
 Jewish Programs Outdoor Pool & Tennis Other: _____

The Schenectady JCC has a policy of non-discrimination as it applies to, membership and provision of services in regard to age, creed, color, national origin, sexual orientation, military status, sex, marital status, disability, or any other protected classes as specified in Federal Law and New York State Human Rights Law.



Membership

Teen (ages 13-19)

Month to Month

\$22(\$22.66)
per month

Annual Indoor

\$224(\$230.72)
per year

Annual Complete
(Indoor & Outdoor)

\$39(\$40.17)
per month

Additional Options

Basket Rental

\$30 per year

Locker Rental

\$90 per year

Enrollment Fee

Teen

\$25

\$0

\$0

JCC Friend: \$100 or more tax deductible contribution in addition to your membership dues. Your gift will help subsidize SJCC services to those with limited income.

TOTAL

Payment

Electronic Fund Transfer (please attach a voided check)

monthly

Bank Name _____

Account # _____

Routing # _____

OR

Credit Card

monthly annually

MasterCard Visa Discover AMEX

Account # _____

Exp. Date _____ Security Code _____

Cardholder Name _____

Please initial each box to signify you have read and understand the following:

Teen Adult

SJCC membership is an annual or monthly commitment and is non-refundable. This membership will be automatically renewed for the same period, unless I/we provide 10 days written notice of cancellation.

Electronic Funds Transfer (EFT): I/we hereby authorize and request SJCC to initiate debit entries to my checking or savings account. I understand that funds will be withdrawn on a monthly basis on the 1st. I/we authorize and request my/our bank to accept any debit entries initiated by SJCC and to debit the same to my/our account without liability for the correctness of the entries. All changes in my/our automatic withdrawals must be submitted to SJCC in writing at least 10 days in advance of the next scheduled withdrawal date. Notification to SJCC shall be effective upon receipt.

If you choose credit or debit card as your preferred payment method with the SJCC, you will be charged as an additional 3% on each transaction. On your credit card statement, it will be listed as one transaction that reflects the cost of the service purchased and the 3% service fee.

A one-time enrollment fee is required at joining. Members who cancel and subsequently rejoin will be subject to an additional enrollment fee.

Membership ID cards must be used to access the facility and are non-transferable. There is a \$10 charge to replace lost or stolen cards.

Guest passes are required for all non-members entering the facility. All guests must be accompanied by a member at all times. The applicable guest fee must be paid at the time of the visit.

SJCC has the right to suspend or revoke membership privileges at any time for any reason.

Neither SJCC, nor its officers or employees shall be held liable for any injury to persons or damage to property which might be sustained by members, guests or other persons on the SJCC premises. All persons, whether members or not, using any SJCC facility, whether owned or managed assume all risks incidents to such use.

Membership and program balances 30 days overdue will be subject to a 1% finance charge per month on outstanding balances. All checks, bankcards/debits and EFTs returned for insufficient funds will be subject to \$25 fee.

Accounts with balances due in excess of 30 days will be prohibited for registering for future programs.

Any false statements made in this application will result in immediate suspension.

My signature below gives my permission for SJCC to use photographs/videos taken of me and my family at the facilities or engages in any SJCC programs.

I/we, the undersigned, hereby make application for membership in the Robert & Dorothy Ludwig JCC of Schenectady on the Golub Family Campus. I/we agree to abide by all Center rules and policies. I/we understand that fees are payable in full upon application, unless other arrangements are made. I/we understand that membership dues are subject to change each year and that I/we assume the financial responsibility of the membership dues. If this agreement is placed with an attorney for collection, I/we agree to pay all lawful costs of collection including a reasonable attorney fee.

Teen Signature _____

Date _____

Adult Signature _____

Date _____

for office use only

intake _____ a/p _____ effective date ____/____/____ promotion _____ new ____ renew ____ change ____ return ____
12/16/25