

FACULTY/STAFF Reduced Hours Membership Application

Select One: New Member Complete sections 1,2 & 3
 Previous Member Complete sections 1 & 3

*Access to SRC 6 a.m. to 1p.m. weekdays and all day weekends.
 **Entry will not be allowed after 12:40 p.m. on weekdays and member must exit SRC prior to 1 p.m. on weekdays.

1. Membership Details: One Applicant Per Form.

Name: _____

Western ID #: W _____

Membership Term:

- Annual (Sept. 25, 2024 through Sept. 23, 2025)
- Academic WWU Students, Faculty & Staff only (Sept. 25, 2023 through June 23, 2025)
- Quarter **Fall** - Sept. 25 - Jan. 6 **Winter** - Jan. 7 - March 31 **Spring** - Apr. 1 - June 23 **Summer** - June 24 - Sept. 23

2. Personal Information: Previous Members complete this section only if your information has changed.

Address ()	Apt. #	City	State	Zip
Phone Number	Email Address		()	
Emergency Contact (required)	Relationship	Phone Number		

3. Membership Declaration: Required.

Memberships will not be refunded except in an unusual, unforeseen circumstance. Each requested refund will be judged on a case by case basis. Your signature below acknowledges that you agree to abide by all SRC policies and gives Campus Recreation Services permission to store your photograph in a membership database for official use only. Campus Recreation Services reserves the right to deny or cancel membership as a result of policy violations and/or exhibition of abusive behavior.

Signature _____ Date _____

4. Payment Details: To be completed by SRC Staff.

Payment Method: Cash Check (# _____) VISA MasterCard Payroll Deduction Annual & Academic Only

Membership: \$ _____
 Sales Tax: \$ _____
 Total: \$ _____

Employee Initials: _____

Date: _____

Membership Staff
 Date Entered: _____
 Employee Initials: _____

Hold Harmless Agreement Completed? No Online Hard Copy No/Renewal

Notes: _____

Refunds:

Memberships will not be refunded except in an unusual, unforeseen circumstance. Each requested refund will be judged on a case by case basis.

