

New Member Application

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Samuel L. Felton Jr. Athletic Club is a private organization and membership is NOT guaranteed to anyone. Membership can be denied and/or revoked at anytime for any reason. This application is one of several steps that will be used to determine if you and we are a good fit. Feel free to ask any questions you may have about this policy.

PLEASE PRINT CLEARLY

Name: _____ Today's Date: _____

Phone Number(s): _____

Email: _____

Address: _____

City, State, Zip: _____

Date Of Birth: _____ Age: ____ Sex: ____

How were you referred to us? (word of mouth, internet search, flyer, etc.)

What are you interested in? (circle all that apply)

- BOXING WRESTLING SELF-DEFENSE FITNESS**
- WEIGHT TRAINING GROUND FIGHTING COMPETITION KNOWLEDGE**
- MMA TRAINING PRIVATE LESSONS BOOT CAMP TYPE FITNESS TRAINING**

What is your reason for wanting to join Samuel L. Felton Jr. Athletic Club?

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Do you have a criminal record? _____ If yes, please explain:

NOTE: A criminal record does not automatically exclude you from membership. Lying does.

Are you able to budget at least \$20 per month for your Club Membership? _____

Do you have any previous *BOXING, WRESTLING, WEIGHT training*? If yes, please explain: _____

What did you like about your training?

Why did you stop training?

When was the last time you were involved in Physical activities?

Will you be living in the area (Lorain) for the next year?

Please make sure you fill out attached "**TERMS OF ENROLLMENT AND RELEASE OF LIABILITY**"