

WILLY'S WORLD
 WWCC
 P.O. Box 1949
 North Eastham, MA 02651
 Phone: 508-255-6370
 Fax: 508-240-0739

**Members and Guests Waive
 any club liability for issues
 related to COVID-19**

Date _____
 Member # _____
 Salesperson _____

MEMBERSHIP AGREEMENT

Name _____ Phone _____ Cell _____ DOB _____
 Mailing _____ City _____ State _____ Zip _____
 E-Mail _____ Emergency Contact _____ # _____

Membership Type _____	Price \$ _____
Start Date _____ Exp Date _____	Processing Fee \$ _____
<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Gift Card <input type="checkbox"/> Club Cash	Total \$ _____

WWCC, LLC is hereinafter referred to as the "Facility".

Member warrants, represents, and agrees that he/she is in good physical condition and that he/she has no disability, impairment or ailment preventing the member from engaging in active or passive exercise. Member fully understands and agrees that in using the Facility or programs whether inside or outside of the premises of the Facility there is the possibility of injury, accidental or otherwise. Member understands that the Facility reserves the right to restrict usage or require additional medical approval if it is believed that the member may be at risk due to excessive exercise. Member understands it is his/her responsibility to inform the Facility of any change in health or medical status by completing an updated health history form. Any failure to utilize the Facility shall not relieve member of the obligation of this agreement, and it is further agreed that no deduction allowance, or refund of any moneys paid and due under this agreement shall be made by reason of member's absence or withdrawal, unless for reasons listed below. The Facility reserves the right to close for up to two months per year for renovations. Member agrees to keep and obey all rules and regulations now in force or in the future prescribed by the Facility for the use of services offered or equipment therein, and the Facility reserves the right to revoke member's membership for cause if member fails to keep and obey any such rules and regulations. Member agrees that the Facility is not responsible for personal property.

Consumer's Right to Cancellation: You may cancel this contract without any penalty or further obligation by causing a written notice of your cancellation to be delivered in person or postmarked by certified or registered United States Mail within three (3) business days of the date of this contract or the date of your receipt to Willy's Gym and Fitness Center, address and phone # above. Saturday shall be considered a business day.

Additional Right to Cancellation: You or your estate may cancel this contract for any of the following reasons: if upon a doctor's order, you cannot physically or mentally receive the services because of significant physical or mental disability for a period exceeding three months, in the case of your death, if the health club services to be provided under the contract are not available because the seller fails to open a planned health club or location, permanently discontinues operation of a health club or location, or substantially changes the operation of the health club or location, or if you move your residence more than twenty-five miles from the health club. Any refund due under this paragraph will be calculated by deducting from the total amount paid: (1) Current initiation fee and (2) Standard usage fee for monthly members for a similar program for the amount of time expired up to the cancellation effective date. The effective cancellation date is the later of (1) Postmark of Certified or Registered Mail or (2) The effective date of the actual event.

How to Exercise Your Rights: You must send written notice by registered or certified mail (for initial right to cancel you may deliver written notice in person at the Fitness Center). Such notice shall be accompanied by the contract forms, ID card; and any other documents or evidence of membership previously delivered to you. Other than the initial right to cancel, the Facility may require reasonable evidence of the reason for cancellation. A medical cancellation will require satisfactory evidence from the member's physician in writing. A relocation will require proof in writing of your new address.

I authorize Willy's World Wellness & Conference Center to make, have, use, publish, and reproduce photographs, slides, motion pictures, and/or video tapes of myself for its records and public relations program.

NOTICE TO THE BUYER: (1) Do not sign this agreement before you read it or if it contains any blank space. (2) You are entitled to a completely filled-in copy of this agreement. Member acknowledges that he/she has read and received a filled-in, signed copy of this agreement and copy of the rules and regulations. (3) Individual memberships, programs, one on one or other services are non-transferrable. (4) NO REFUNDS. (5) CANCELLATION FEE APPLIES.

By (WWCC, LLC) _____ Date _____ Member Name _____ Date _____
 Member's Co-signer/Parent/Guardian _____ Date _____