



Visitor Sign-In Sheet

*All visitors must show a valid picture id.

Drivers license or student	ia is acceptable. C	ine FKE	E Vis	sit per	person.		
Member Information							
First	Middle			Last			
Address	Apt/Unit# City				State	Zip	
Date of Birth	Home Phone			Cell Phone			
	Individual \$40.00			Family			
6 month				\$70.00			
12 month	\$65.00			\$120.00			
*Please enjoy this complemen with us, please sign up for a m	•			•			
Liability Waver (please read and sign)							
I, the undersigned registrant, or pa Church Presbyterian, Dalton, GA, do her							

representatives, volunteers, and staff from all liability of any kind and character upon any claim, demand, or course of action which might be asserted on behalf of myself, any children 16 years of age, or any guest against the church, staff, representatives, or volunteers. Furthermore, in case of an accident or medical emergency, if the staff, representatives, or volunteers are unable to contact the parent(s)/guardian(s), I hereby grant permission to the staff, representatives, or volunteers to administer necessary first aid, and/or to arrange transportation to the nearest medical facility or treatment.

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I understand that before beginning any exercise	program, I should consult with a physician. In addition, if
I am on a medically supervised exercise program, I wil	l clear my use of the Recreation Place of ChristChurch
Presbyterian, Dalton, GA with my supervisor. I agree	to obey all the policies and procedures of the Recreation
Place of ChristChurch Presbyterian, Dalton, GA, to kee	ep the facility clean, and to promote a Christian atmosphere.
Signature of Visitor	 Date