<u>lemberships Require</u>	ed < > HRC is	s a *MEN	IBERS ONLY* Club Facility.
Hershey Racquet Club	□ Curren		2024-2025 ADULT Membership ership- After August 31st
			hip if PAID in August!
	*** <b>PLE</b> A	SE Print CL	EARLY ***
NAME			
Address			
			Home Phone #
CELL PHONE #			Work Phone #
E-MAIL			
direct or consequential resu	ults that may be anticipatis in good physical hea	ited, or that occu Ith and has app	as made no representations or warranties, concerning any arr, by reason of the use of facilities or equipment.  Propriate medical insurance in the event that medical
			nary Medical Payment Coverage.
In conside I understand the	ration for my member	ship, I represent vities involves	t affirm and promise HRC that: risks of injury or other harm to me.
I assume all such risks knowingl condition. The use of the facili	ly and voluntarily, inclity and equipment und	uding but not li ertaken is at my to me that resu	imited to those risks associated with my own physical y sole discretion and risk. I will not hold HRC or its alts from my participation, unless they cause the injury
			PLIED; MEMBER'S SOLE EXCLUSIVE NCELLATION OF THIS AGREEMENT.
			ID AFFIRM UNDER PENALTIES OF PERJURY VE IS COMPLETE, CORRECT AND TRUE.
Member Signature			Date