



## JACISERA Fitness and Wellness Centre Membership Application

### Member's Details

Membership No. \_\_\_\_\_

Title: (Mr./Mrs./Miss)

Male  Female

Name: \_\_\_\_\_ Date of Birth(dd/mm/yyyy) \_\_\_\_\_

Address: \_\_\_\_\_

Tel. contact: \_\_\_\_\_ (c) \_\_\_\_\_ (h) \_\_\_\_\_ (w)

Email: \_\_\_\_\_

Place of employment: \_\_\_\_\_ Post \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Tel. No. \_\_\_\_\_

#### ***In case of emergency contact:***

Next of Kin. \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Tel No: \_\_\_\_\_

***Payment: You are required to pay the sum of Two Thousand Five Hundred Dollars (\$2,500) upon registration and thereafter the amount will be deducted monthly from your salary or otherwise.***

**Monthly fees - \$2,500.00** - pay debit/credit card, salary deduction, cash, online transfer.

**Half Yearly - \$13,500** - pay debit/credit card, cash, online transfer.

**Annually - \$24,000** - pay debit/credit card, cash, online transfer.

### Salary Deduction Order

I \_\_\_\_\_ authorize the deduction of Two Thousand Five hundred dollars monthly from my salary as my gym and fitness fee. This deduction becomes due on the 31st day of each month. **Also as a condition of my membership I will abide by the rules and guidelines that govern the facility.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Enrollment date: \_\_\_\_\_

Renewal Notice: \_\_\_\_\_