



## SOUTH MILWAUKEE FITNESS CENTER

901 15<sup>TH</sup> Avenue

South Milwaukee, WI 53172

Sign up now to enjoy our 4300 square foot fitness center, 200 meter elevated rubberized track, aerobic studios and four full sized basketball courts. We offer 20 pieces of Stairmaster cardiovascular equipment; Magnum selectorized machines, free weights and Olympic lifting platforms. Five 32-inch flat screen televisions are provided for your workout experience, as well as satellite radio so you can listen to all your favorite songs. We also offer a variety of aerobics classes and personal training.

### HOURS OF OPERATION

#### Weekly Hours

**Monday – Thursday** 5:35 am – 9:00 pm    **Friday** 5:35 am – 8:00 pm

#### Weekend Hours

**Saturday** 8:00 am – 5:00 pm    **Sunday** 8:00 am – 3:00 pm

### Fee Structure

	<u>Monthly</u>		<u>Annual</u>	
	resident	non-resident	resident	non-resident
Joiners fee <i>(one time payment)</i>			\$15.00	\$30.00
Single	\$24.00	\$30.00	\$232.00	\$250.00
Family	\$39.00	\$45.00	\$310.00	\$330.00
Senior Single <i>(55+)</i>	\$15.00	\$20.00	\$122.00	\$140.00
Senior Couple <i>(55+)</i>	\$20.00	\$25.00	\$193.00	\$210.00
HS Student	\$8.00	\$16.00		
SDSM Staff	\$15.00		\$122.00	
Staff Family	\$29.00		\$310.00	
Corporate			\$200.00 per person <i>(minimum of 5 members required, payment due all on the same day)</i>	
Guest Pass	\$5.00 per day			

Contact us at [www.smrec-fitness.org](http://www.smrec-fitness.org) or give us a call at 414-766-5084

**Membership Enrollment Form**  
*South Milwaukee Fitness Center*

South Milwaukee Fitness Center  
 901 15th Avenue  
 South Milwaukee, WI 53172

**PLEASE COMPLETE THE FOLLOWING:**

NAME: \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ WORK/CELL \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ACCOUNT LOGIN NAME \_\_\_\_\_ PASS WORD \_\_\_\_\_

QUESTION \_\_\_\_\_ ANSWER \_\_\_\_\_

**MEMBERSHIP CLARIFICATION**

**RESIDENT**– anyone who lives in the city of South Milwaukee. **SENIOR**-55+ years.; **SENIOR COUPLE**– Jointly file taxes/ married couples. **HS STUDENT**– attends South Milwaukee High, or is a resident of South Milwaukee-must present valid student ID for enrollment (students under a Freshman in High School are not allowed). **FAMILY** is yourself, spouse and your high school aged child up to age 22 who live in the same residence. List all family members and spouse covered by the membership.

First and Last Name	DOB	Type of Membership	Cost

**ADULTS SIGN BELOW**

**LIABILITY WAIVER:** All participants are required to sign the following release-Parents or Guardians must sign for Minors. I/We the undersigned, do hereby agree to allow the above name(s) to participate in activity. I/We are aware there may be potential risks inherent with participation in any recreation activity and the South Milwaukee Fitness Center does not provide accident insurance. I/We assume all risks and hazards incidental to such participation including transportation to and from activities and do hereby waive, release, absolve, indemnity and agree to hold harmless the South Milwaukee Fitness Center, officers, staff and other persons from any and all claims, injuries, liabilities, damages or right of action directly or indirectly arising out of use of South Milwaukee Fitness Center facilities, equipment and/or participation in South Milwaukee Fitness Center activities. In the event of an emergency, I authorize the South Milwaukee Fitness Center staff to obtain medical treatment for myself or son/ daughter.

SIGNATURE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**OFFICE USE ONLY**

DATE ACCEPTED \_\_\_\_\_ DATE PROCESSED \_\_\_\_\_ METHOD OF PAYMENT \_\_\_\_\_ CHECK# \_\_\_\_\_

TOTAL COST \_\_\_\_\_ TOTAL PAID \_\_\_\_\_ STAFF (print name) \_\_\_\_\_