FRONT LINE FITNESS
CORPORATE MEMBERSHIP CONTRACT

Company Information

Company Name_____
Address_____ City/State_____
Zip_____ Phone_____ Fax_____
Company Representative: First Name_____ Last Name_____
Phone_____ Email_____

Corporate Rates

(Select Payment Option & List # of Employees Per Membership Type)

# of Employees	Discount	Silver $19.99	Gold $29.99
3-5	15%	$17	$25
6-10	20%	$16	$24
11-20	25%	$15	$23
21+	30%	$14	$21

# of Employees: Silver_____ Gold_____ Total #_____

Contract Payment: ☐ Monthly (Initial_____) ☐ Bi-Annually (Initial_____) ☐ Annually (Initial_____)

One Time Corporate Enrollment Fee: $150

**The enrollment fee is waived when the pay in full payment option is selected*

****FLF Management Only****

Total Cost Monthly $_____ Total Cost Bi-Annually $_____ Total Cost Annually $_____
Contract Term: 1 Year Start Date:_____ End Date:_____

TERMS AND CONDITIONS

1. Contract Term. All Corporate Wellness Program contracts terms are 1 year.

2. Cancellation. Companies are allowed to cancel this contract any time prior to midnight, of the third business day _____/_____/_____, after the contract has been signed. After this period, there are **NO CANCELLATIONS OR REFUNDS**. **Companies must notify Front Line Fitness management of their intent to cancel in writing**, by the date noted above in this paragraph. Cancellation request can be submitted via US Postal Service (USPS), email, or in person at Front Line Fitness. If mailed USPS or email, it must reflect that the letter or email was sent by the suspense date above in this paragraph. If emailed, the subject line of the email must read "CANCELLATION REQUEST". If any of the directions in this paragraph are not adhered to, Front Line Fitness reserves the right to cancel or not cancel the contract.

3. Early Termination Clause. Companies that elect to terminate their corporate agreement early will be charged the remaining balance on the contract, divided by two. Companies must notify Front Line Fitness

Initials _____

management of their intent to cancel in writing, by the 25th of the month. Cancellation request can be submitted via US Postal Service (USPS), email, or in person at Front Line Fitness. If mailed USPS or email, it must reflect that the letter or email was sent by the suspense date above in this paragraph. If emailed, the subject line of the email must read "CANCELLATION REQUEST". If any of the directions in this paragraph are not adhered to, Front Line Fitness reserves the right to cancel or not cancel the contract.

4. Company Member Roster. Companies are required to complete and submit a roster of all employees that elected to participate in the Corporate Wellness Program, with this completed contract. Companies will use the Front Line Fitness corporate employee roster format provided.

a. Add / Drop Employees. Companies are allowed to add / drop members once per month by submitting an updated Front Line Fitness corporate employee roster by the 25th of the month annotating the changes. There is no fee incurred for this action unless the number of employees is reduced to a number that is lower than when the contract was established. The fee is the remaining balance on the contract divided by two, for each employee below the original number. Employee membership type will also have an impact on the fee amount. **Example**: **Company established Corporate Wellness Program contract with 10 employees with Silver Memberships. The company makes changes via Front Line Fitness corporate employee roster the next month after establishing the contract and the new total number of employees in the program falls to 8 employees. There are 11 months remaining on the contract. The company fee is $176 for the 2 lost employees.**

5. Employee/Member Responsibility.

a. **Consent & Waiver Form.** All members / employees will complete and sign a consent and waiver form before being allowed to use any part of the facility or participate in any program(s).

b. **US Government Issued ID.** All members / employees will provide proof of identification via US Government Issued ID.

c. **Age Requirement.** All members must be at least 18 years of age or the parent / legal guardian are required to sign the membership contract and complete a parental consent and waiver form. **Children under the age of 16 must be accompanied by an adult with a current membership. Children must be 13 years of age or older to become a member.**

d. **Liability for Personal Property.** Front Line Fitness will not be liable to members or any member guest for any personal property that is damaged, lost or stolen while on or around Front Line Fitness's premises including, but not limited to a vehicle or its contents or any property left in a locker, cubby, or any area of the health club. Members shall be liable to Front Line Fitness for any damage to Front Line Fitness's facilities or any equipment, furniture or fixture located thereon caused by member or any member's guests

e. **Bring a Guest (Gold Members Only).** Gold members are permitted to bring 1 Guest to use the facility for free during normal hours of operation. Guest are required to pay non-member prices for any group fitness classes they wish to attend. Guest are required to sign a waiver before they are allowed to use any part of the facility and must sign in at the front desk each visit. The member must be present to sign the guest into the facility. **If these procedures are not adhered to, the member will lose this benefit.**

6. Payment Method. Electronic Fund Transfer (EFT) is required for the monthly corporate membership payment option. Companies that elect to pay the total cost of the annual contract, can pay using a company credit card / debit card, company check, or cash in the form of a certified check or money order made out to Front Line Fitness.

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☐ Credit Card: Visa / Master Card / Discover / American Express ☐ Company Check ☐ Cash (Certified Check or Money Order)

Credit Card #: _____ Exp Date: _____ CVC: _____

I certify that I have read the foregoing Corporate Wellness Program Membership Agreement, and that I am an authorized company representative to make this agreement on behalf of the company with Front Line Fitness; I also acknowledge that I understand and agree to be bound by all of the terms and conditions hereof. I further acknowledge that I have received a fully executed copy of this Corporate Membership Agreement. I am 18 years of age or older.

_____	_____	_____	_____
Company Representative Signature	Date	FLF Management	Date
_____		_____	
Print Name		Print Name	