



Raymond B. Preston Health & Activities Center
Buddy Membership Application

NOTE: Only members of the Raymond B. Preston Health & Activities Center may purchase a Buddy Membership for their children or grandchildren (19 and over), a friend or significant other. Sponsoring members must remain Preston Center members in order for the Buddy to maintain his/her membership status. Sponsoring members are responsible for the actions of their Buddy. Should a Buddy lose their membership for not adhering to Policies and Procedures, the Sponsoring Member's membership will be forfeited as well. Members will be informed by the Control Desk when your membership is about to expire. Please remember that upon your expiration date, your Preston Center ID card will automatically be deactivated unless membership payment and form have been completed. All members will have to have an ID to enter the building. Only current WKU Faculty/Staff and students may use their WKU 800#. All others will be assigned a Preston Only 500#. There is a \$10 charge for all ID cards. Non-employees/current students are eligible for the "Preston Only" Parking Permit available through Parking and Transportation.

SPONSORING MEMBER INFORMATION:

WKU ID#: _____ Name: _____
Date of Birth: ____/____/____ E-mail Address: _____
Home Address: _____
Street City State Zip
Home Phone: (____) _____-_____ Cell Phone: (____) _____-_____ Office Phone: (____) _____-_____
Emergency Contact: _____ Phone #: (____) _____-_____
Membership Classification: _____

Sponsoring Member Signature: _____

BUDDY INFORMATION:

Assigned #: _____ Name: _____
Date of Birth: ____/____/____ E-mail Address: _____
Home Address: _____
Street City State Zip
Home Phone: (____) _____-_____ Cell Phone: (____) _____-_____ Office Phone: (____) _____-_____
Emergency Contact: _____ Phone #: (____) _____-_____

Buddy: Please read and sign the consent form on the back.

Annual Fee: \$300 _____ Fall & Spring Semester Fee: \$125 _____ Summer Semester Fee: \$70 _____

TOTAL LUMP SUM PAYMENT: _____

Payment: _____ Cash _____ Check/Money Order # _____ Credit Card

I understand and am aware that by using the Preston Center facilities, and services offered by the WKU Department of Campus Recreation & Wellness, I may experience potential health risks including, but not limited to, injury, cramps, transient light-headedness, fainting, abnormal blood pressure, chest discomfort, nausea and possible death. I acknowledge that I should obtain permission from my physician before engaging in any exercise activity, and that I am voluntarily using these facilities and services with the knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death.

SIGNATURE: _____ DATE: _____

Office Use Only: _____

CSI _____ MEMLIST _____ Audit Report _____ LIST SERVE _____ Rev: 7/24/2015