

MSUB Alumni

Recreational Activities Membership

Fall 2017 - Summer 2018



Alumni Contact Information — Must be a recognized MSU Billings Alum.

Last Name _____ First Name _____ MI _____

Campus Phone _____ Phone (_____) _____ - _____ Gender: _____

Email: _____ Renewal: Yes No

I understand all terms and conditions listed on the reverse side of this form.

Signature: _____ Date: ____/____/____

CHOOSE ANNUAL, ACADEMIC OR SEMESTER PLAN

<input type="checkbox"/> Annual Plan (Fall , Spring & Summer) - Membership Expires August 31, 2018																																														
	<table border="1"> <thead> <tr> <th></th> <th>Current Month</th> <th colspan="5"># of months remaining before August 31</th> <th>Rate</th> <th>Sub-totals</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Membership:</td> <td></td> <td>12</td> <td>11</td> <td>10</td> <td>9</td> <td>X</td> <td>\$32 / month</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Towel Service: Given a towel at sign-up. return used towel to receive clean towel.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>\$15.00</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Locker Rental: Men's or Women's Locker Number:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>\$30.00</td> <td></td> </tr> <tr> <td>Lock Serial: Combo:</td> <td></td> <td colspan="6"></td> <td>Total Due Annual Plan:</td> </tr> </tbody> </table>		Current Month	# of months remaining before August 31					Rate	Sub-totals	<input type="checkbox"/> Membership:		12	11	10	9	X	\$32 / month		<input type="checkbox"/> Towel Service: Given a towel at sign-up. return used towel to receive clean towel.							\$15.00		<input type="checkbox"/> Locker Rental: Men's or Women's Locker Number:							\$30.00		Lock Serial: Combo:								Total Due Annual Plan:
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☐ **Free Fitness Assessment:** Sign-up for a free fitness assessment. Assessments are a great way to get a baseline of your overall health and fitness. Regardless of your fitness level, these tests can help you set specific, realistic and reachable goals. Senior HHP majors enrolled in KIN 415- Advanced Exercise Testing & Prescription, perform evaluations. Questions? alex.shafer@msubillings.edu

Payment Method – To be filled out by Recreation Activities Employee Amount Due: \$

Cash \$ _____ Credit \$ _____ Check #: _____

Rec Activities Staff _____

Date ____/____/____