



COLUMBIA  
UNIVERSITY  
CLUB

NEW YORK



PALESTRA  
HEALTH CLUB  
SUMMER MEMBERSHIP  
APPLICATION

**THIS IS A COMMON APPLICATION FOR THE  
COLUMBIA UNIVERSITY CLUB AND THE PENN CLUB.**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School & Class Year: \_\_\_\_\_

**PERSONAL INFORMATION**

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

CITY

STATE

ZIP

Home Phone: (    ) \_\_\_\_\_ Cell Phone: (    ) \_\_\_\_\_

Permanent Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**SUMMER PALESTRA MEMBERSHIP FOR STUDENTS UNDER AGE 21**

May 1 through August 31, 2018

\$90 plus sales tax

Membership is non-refundable and non-transferable.  
Available to current full-time students only. College ID required.

Summer Palestra membership is for full-time undergraduate students. The graduating class of 2018 is not eligible for this membership. This option is available for those who are not 21 years of age, and is subject to availability. Palestra Summer Members are not full Penn Club members. As such, access is limited to the Palestra Fitness Center facility and the locker rooms only. The squash courts at the Yale Club, Penn Club events, business center, overnight rooms, dining, banquet facilities and reciprocal clubs are not open to Palestra Summer Members. Graduate students and those over the age of 21 may join The Penn Club as either full members or Summer Members to utilize the rest of the clubhouse facilities and its services.

Please call 212-403-6627 or email membership@columbiaclub.org for more information.

**PAYMENT INFORMATION**

Payment must be submitted with application.

**CREDIT CARD:**

American Express    MasterCard    VISA

Applicant/Cardholder Name (REQUIRED): \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Please complete side 2*

**THE COLUMBIA UNIVERSITY CLUB • THE PENN CLUB**

30 West 44th Street | New York, NY 10036

Phone 212.403.6627 | Fax 212.403.6616 | membership@columbiaclub.org



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## INFORMED CONSENT RELEASE FORM

PLEASE READ AND SIGN THE FOLLOWING:

I, the undersigned, wish to use the Palestra at The Penn Club, managed by Plus One Health Management, Inc. ("Plus One"), and I understand that the use of the Palestra is at my own risk.

I also understand there exists the possibility of certain changes occurring during exercise. They include abnormal blood pressure, rapid or slow heart beat, and in certain instances cardiac complications.

I agree that The Penn Club and Plus One shall not be liable or responsible for any injuries to me or changes in my physical condition resulting from my use of the Palestra during my exercise session.

I expressly release and discharge The Penn Club and Plus One and their principals, employees, agents and assigns from all claims, actions, and judgments which I or my heirs, executors, administrators and assigns may have or claim to have against The Penn Club and Plus One and / or their principals, employees, agents and assigns, for all injuries or other damage which may result from my use of the facility. This release shall be binding upon me, my heirs, executors, administrators and assigns.

The Penn Club and Plus One shall not be liable for the disappearance, loss or theft of, or damage to my personal property including money, negotiable securities, furs or jewelry even though such property may be lost, disappear, stolen, or damaged while stored in lockers located within the Palestra.

I have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance. This release shall apply to all my visits to the Palestra.

Name : \_\_\_\_\_ Member Number : \_\_\_\_\_

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

The Palestra is able to provide you with a free subscription to the popular "Better Letter" wellness internet newsletter:

Enter your e mail address here: \_\_\_\_\_ Check one:  text  html

I would like to receive other health and fitness information: Check one:  Yes  No

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