University of Maine Campus Recreation
Payment-Over-Time Purchase Application
There is no credit check, this information is simply being collected for processing by Admin staff.

TODAY’S DATE: ___________ CREC STAFF: _________________

HEAD OF HOUSEHOLD (Whomever has closest affiliation with UMaine or Corporation.)
Affiliation w/ UM? Employee/Retiree  Alumnus  Corporate Affiliate  Local Resident

IF UMaine Employee: What is your Employee ID Number? ________________
IF Corporate: What company? ________________ Badge Number: ________________

Name: ____________________________ Birthdate: __________ Gender: __
Address/City/ST/Zip: ________________________________
Cell Phone*: ________________________ Home Phone*: ________________________
Email*: ________________________________
* We won’t give out your personal info. Phone/email are both required for membership correspondence.

SPOUSE OR DOMESTIC PARTNER (Circle One. If Domestic Partner, Notarized Affadavit is Required.)
Name: ____________________________ Birthdate: __________ Gender: __
Email: ________________________________
Cell Phone: ________________________________

LEGAL DEPENDENTS (aged 0-25)
Child 1: ____________________________ Birthdate: __________ Gender: __
Child 2: ____________________________ Birthdate: __________ Gender: __
Child 3: ____________________________ Birthdate: __________ Gender: __
Child 4: ____________________________ Birthdate: __________ Gender: __
Child 5: ____________________________ Birthdate: __________ Gender: __
Child 6: ____________________________ Birthdate: __________ Gender: __

What would you like to purchase?
☐ Semester Membership
☐ 12-Month Membership
☐ Perpetual Membership*
  * Continues until cancelled in writing
☐ Early Bird Pass
☐ Wallace Pool Pass
☐ 20 Punch Pass
☐ Other Miscellaneous (Programs Etc.)
☐ M Locker (Circle One: Sem, Ac Yr, 12mo, or 3yr?)
☐ W Locker (Circle One: Sem, Ac Yr, 12mo, or 3yr?)
☐ FitPass - Semester Unlimited
☐ FitPass - 25-Uses

How would you like to pay?
☐ Monthly Credit/Debit Card*
  * 12mo & Perpetual Memberships only
☐ Payroll Deduction**
  ** Signed Payroll Deduction Form required

** If Payroll Deduction:
On what date were you last paid, or on what date will you next be paid?

Depending on the cutoff date for your next check, you may need to make a payment up front via cash/check or credit/debit. We’ll let you know.

Thank you. An Administrative staff member will contact you ASAP to finalize your membership.