



PAYROLL DEDUCTION AUTHORIZATION FORM

DO **NOT** SUBMIT THIS COMPLETED FORM TO PULSE FITNESS.
RETURN IT TO **HUMAN RESOURCES** FOR PROCESSING

Employee Name: _____

Enrollment

Change

Cancellation

Membership is non-transferable and non-refundable. Continued membership will be on a month-to-month basis for employees and add-ons.

Membership Includes:

- Member rates: \$24/month & \$20/month per Add-on*
- All new members receive a complimentary fitness assessment
- Waived Enrollment fees
- Must come into Pulse Fitness during Staffed Hours to get set up:

Monday-Friday 7am-7pm

Saturday-Sunday 7am-3pm

- Membership Includes: 24/7 access, over 30 Group Fitness Classes, Spinning, Dry Sauna, and free Kids Club
- Tanning also available at additional cost

*Add-on members must be related or live in the same household

Check One: New Member

Existing Member

Add:

Name: _____ Add

Name: _____ Add

Delete:

Name: _____ Delete

Name: _____ Delete

Enrollment and changes made to your membership must be received by the 25th of the month to be effective on the 1st of the following month

By signing below you acknowledge the following: Monthly fees will be deducted from your paycheck. There are no refunds; if your employment ends prior to the expiration of your membership any balance due will be deducted from your final paycheck. Northsails shall not be held liable for any consequences of any type arising out of your membership with Pulse Fitness. Northsails urges you to consult a physician before joining in any exercise regimen.

Employee Signature

Date

For Office Use Only:

Certificate Issued _____