



PAYROLL DEDUCTION AUTHORIZATION FORM

DO **NOT** SUBMIT COMPLETED FORM TO PULSE FITNESS. RETURN FORM TO DCSD **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 DCSD employees and add-ons.

Membership Includes:

- Member and Add-on* rates prior to 1/31/2024: \$24/month (employee member) & \$20/month (per Add-on*).
- Member and Add-on* rates after 1/31/2024 \$30/month (employee member) & \$26/month (per Add-on*).
- All new members receive a complimentary fitness assessment.
- Waive Enrollment fees and no contract.
- Must come to 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, Spin, 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. DCSD shall not be held liable for any consequences of any type arising out of your membership with Pulse Fitness. DCSD urges you to consult a physician before joining in any exercise regimen.

Employee Signature

Date



For Office Use Only: Certificate Issued _____