

**Plankinton Area Wellness Center  
Key Entry Agreement**

I agree to the following terms set forth by the Plankinton Area Wellness Center, herein referred to as PAWC.

Key #....., is the property of PAWC and was made available to me/us.....  
.....on this date....., upon payment of a deposit of \$ 30.00, refundable at the end of my/our membership and/or return of key to PAWC.

I understand that I/we have to remain a paying member to retain possession of said key and abide by all PAWC rules. Non-compliance and/or loss of key will result in the loss of the deposit. I also understand that The Board of Education of Plankinton Schools has authorized PAWC to have access to the building with the assurance that any access would be responsible and that building security would not be at risk.

I agree to not duplicate or loan this key to anyone, or in any way breach the trust extended to me. PAWC will be held harmless of any loss or damage due to my negligence or irresponsible use of this key and/or actions.

I am aware that a PAWC member has to be 21 years of age to obtain a key. Member is described as 1 key per single rate or 1 key per a family rate.

No person(s) under the age of 21 shall use the facility via key entry after hrs. unless he or she is accompanied by an adult 21 yrs or older, and who is the signee of this key agreement.

Keys are assigned by name and number and are not transferable to others, but must be returned to PAWC when the agreement expires with my membership, and/or when found due to misplacement by another member, and/ or due to breach of this agreement.

Key entry permits the use of the facility from the hrs of 6 pm – 8 am. (the following day). During School hrs the PAWC will have to be accessed through the front south side doors and I must sign in at the front desk as well as the PAWC.

I agree to leave the facility in good and clean condition, making sure all electrical components are turned off. This includes Lights, Fans, Treadmills and TV, as well as double check that doors and windows are fully locked before leaving the facility. If problems arise, I will contact a committee member immediately.

All terms of the Membership Waiver, which I have read and signed, also apply to this agreement.

PAWC advises all members to think of safety first. It is suggested to not use the facility alone, especially at later hrs of the day. Have a friend or family member with me and familiarize myself with the use of equipment, phone and exit strategies. Know my limits and check with my doctor before beginning any exercise program, remembering safety first.

Signed..... Address:.....

Date..... Phone:.....

Deposit pd. By...cash/check#..... Committee Member.....