STONY BROOK UNIVERSITY
SPORTS COMPLEX MEMBERSHIP

Name: _____ Date: _____

Address: _____

_____ Phone: _____

USER STATUS: (Please check one only)

___Stony Brook Faculty/Staff Family*	$125
___Student Family*	$110
___Stony Brook Affiliate [+]	$75
___Stony Brook Affiliate [+] Family*	$150
___Senior Citizen (60 years or older)	$100
___Community Individual	$250
___Community Family*	$450
___Alumni Assoc.** Individual	$150
___Alumni Assoc.** Family*	$225
___Replacement Card fee	$20

*Family Membership applies to 4 individuals: spouse/significant other and children ($50 each above 4)
**Alumni Association Membership required (William and Jane Knapp Alumni Center 632-6190)
[+] Affiliates include Brookhaven National Labs & CoGen Employees, DEC Employees, Incubator Employees, Retired Faculty/Staff

Please list the names of additional members on membership

_____ _____

_____ _____

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*The Sports Complex is not a private health club. Facilities are available when not scheduled for classes, Intramurals, Athletics and university or special events. Call one day in advance to reserve racquetball and squash courts (632-7200). The pool will be open for scheduled recreational swim hours only during those days and weekends when academic class calendar is in effect, and when the summer session class calendar is in effect. There will be no recreational swims when classes are not in session, when classes are canceled (e.g., due to inclement weather), and when the building is closed (e.g., for Athletics, Intramurals, and special events). The pool will be open for an abbreviated open swim scheduled weekday afternoons only during Winter Break, from January 2 through the Friday before Spring Semester begins. The pool will be closed for one week in late spring or early summer for maintenance. Weight room hours begin when the building opens and end when the building closes**. Membership includes use of pool, weight room, racquetball and squash courts, running track, and gym for open recreation**.*

_____ _____ _____
Signature Date Expiration Date

Please Make Checks Payable to "Stony Brook IFR 900074"

Fee Paid: _____ Check Number: _____ Cash Receipt: _____ Date: _____ By: _____