Kinmen County Sports Fitness Center Membership Application Form

|  |  |  |  |
| --- | --- | --- | --- |
| 相片Photo  | 姓名(Name) | 出生日期(Date of Birth) | 身分證號碼(ID or Passport Number) |
|  |  |  |
| 性別(Gender) | 聯絡電話(Contact number) | 手機(Mobile) |
|  |  |  |
| 地址(Address) |  |
| e-mail |  |
| 緊急聯絡人(Emergency Contact) |  | 聯絡電話(Contact number) |  |

**Application and Withdrawal of Membership at the Physical Fitness Center:**

**1.Any citizen of the ROC or resident of Kinmen County aged 15 and above can apply for**

 **membership at this fitness center.**

**2.Applicants must bring identification for verification (foreigners must provide a**

 **passport or residence permit). Upon completion of the review, applicants will be notified**

 **to pay the fee within three days and will be issued one entrance magnetic card per member.**

 **The cost for the membership card is NT$200, and a deposit of NT$1,000 is required,**

 **totaling NT$1,200.Membership cards may not be sold or loaned to others. Violators will**

 **have their membership revoked and their membership cards confiscated; the cost of reissue**

 **of lost cards is NT$100.**

**3.When members apply for withdrawal, they must submit a withdrawal application, attach a**

 **deposit receipt, a copy of their bank account, and return the magnetic card. The deposit**

 **of NT$1,000 is refundable without interest (the card issuance fee of NT$200 is non-**

 **refundable).**

 **Rules for Using the Physical Fitness Center:**

**1.Timetable of the Fitness Center:**

 **Monday to Sunday: 8:00 am to 12:00 pm, 1:30 pm to 5:30 pm, 6:00 pm to 9:30 pm.**

**2.A center membership card is required for access.**

**3.Individuals under the age of 15 are prohibited from entering; those under 18 must be**

 **accompanied by someone knowledgeable in fitness equipment usage.**

**4.Users must wear proper, comfortable sportswear, clean athletic shoes, and bring a towel.**

 **Attire such as leisure pants, khaki pants, jeans, suits, shirts, cushioned leather shoes,**

 **high heels, loafers, sandals, and slippers with metal buckles or protruding accessories**

 **are prohibited.**

**5.** **After using the device, users must wipe off sweat with a towel.**

**6.Smoking, chewing betel nuts or gum, and consuming food (except mineral water) are**

 **strictly prohibited inside the fitness center.**

**7.Individuals experiencing discomfort or suffering from conditions unsuitable for intense**

 **exercise should refrain from exercising. Exercise should be based on individual physical**

 **condition.**

**8.Users should alternate equipment usage appropriately; when others are waiting, users**

 **should not sit on equipment for rest.**

**9.Without approval, teaching or training activities are not permitted on the premises.**

**10.Equipment should be returned to its original position after use to facilitate the next**

 **user. If a user repeatedly disregards instructions from staff, their usage may be**

 **suspended for two months.**

**11.Facilities should be used with care. Users should understand the proper usage of**

 **equipment before use. Those who misuse equipment and cause damage will be liable for**

 **compensation.**

**12.The facility does not assume responsibility for personal belongings brought by**

 **individuals.**

**13.The usage of the fitness center may be temporarily suspended for large-scale events or**

 **other needs organized by the facility.**

**Note: The personal information obtained from this application form is for internal use only**

 **by the Kinmen County Sports Complex. The facility will not provide your personal**

**information to third parties or use it for other purposes without authorization.**

**I have read and agree to abide by the above rules.**

**Signature of Applicant:**

**Republic of Chinese Year Month Day**

**（**The following should be filled in by the agency**）**

**Review column**

Member number:

|  |  |  |  |
| --- | --- | --- | --- |
|  | case officer | Fees | Number of card |
|  |  | Magnetic card fee receipt number:Security deposit receipt number: | Magnetic card number: |
| Card collection date | Executive | note |
| Sign for receipt：Date：  **Year Month Day** |  |  |