



Fall 2013 Wellness Center Application
August 26, 2013 to December 20, 2013

Applicant Information:

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip Code _____

Date of Birth: _____ Gender: Male _____ Female _____

Phone Contacts: Home: _____ Work: _____ Mobile: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Phone Numbers: _____

I am a:

UH Maui College or UH Distance Learning Student - \$35.00
(please show proof of enrollment)

Faculty and Staff -\$55.00

Senior Citizen age 55 or over - \$55.00

Public - \$70.00

Wellness Center Fee is Non-Refundable

List Any Medical Conditions: (Always consult with your physician before beginning any exercise program)

Three horizontal lines for listing medical conditions.

