



Combo SCBB Membership Terms and Conditions

Member Name: _____

Address: _____

Ph: _____

Date: _____

Emergency Contact Name and Ph: _____

Membership with R&A Adventure Sports Pty Ltd t/as Indoor Climb South Coast ("ICSC").

Terms and Conditions

Membership Fees:	Paid Monthly - <u>\$63.20 per calendar month.</u>
Minimum Member periods:	Monthly Membership payments are for a minimum period of 2 months, in addition to pro rata payment for the initial part month.
Billing and Pro Rata Payments:	Membership fees will be billed to a nominated credit card on the first day of each month and Memberships either begin on the first day of the next billing period or the member can elect to pay a pro rata payment to cover the initial part month period and begin the membership immediately.
South Coast Barbell Sign Up	The Combo fee is only applicable when the Member has an active Dual Membership with South Coast Barbell. If the South Coast Barbell Portion is cancelled, the Membership Fees will revert to \$79 p/m on the following billing cycle.
Transfers / Refunds	Membership fees are not transferable or refundable. They can only be used by the single named member.
Freezes:	Members can elect to freeze their membership once per year to a total period of 4 months.
Inclusions:	Members are entitled to use the bouldering and training facilities in the gym at any time within the gym's opening hours (as stated on the web site and subject to change from time to time) for an unlimited amount of time. Equipment rental is included in membership fees, and members are entitled to a 10% discount on all climbing gear purchases. T
Cancellations:	Memberships can be cancelled (after the initial 2 months) with the cancellation effective at the end of that current billing monthly period (noting that partial month refunds are not available).
Other Terms:	Members are required to meet all other terms and conditions of ICSC and abide by safety rules, code of conduct regulations.

Member Signature

Date: _____

Payment Details:

Credit Card Number: _____

Expiry: _____

CCV _____

Name on Card _____