



Action Fitness LLC
102 Coffee Street East
Lanesboro, MN 55949
507-272-0549

Day Pass Contract
(Please fill out separate contracts for each individual)

Date(s): ____ / ____ / ____ - ____ / ____ / ____

Guest Name: _____

Address: _____ City: _____

State: ____ Zip: _____ Phone: _____ Cell: _____

E-mail: _____

Emergency Contact Name: _____ Phone: _____

Individual Pass \$8/day

Number of Days _____ x \$8 = _____ (total payment amt)

_____ Individual 7 days = \$20

- 1. Place the completed form (front & back) along with cash payment in the drop box inside the lobby.
2. Contact Action Fitness via text at (507) 272-0549 for access code.

For other payment options sign up online at ActionFitnessLanesboro.com
(An email will be sent upon completion of online sign up with Access Code)

As a guest of Action Fitness, I agree to pay the total guest use fee recorded on this form. I understand that the success and continuance of Action Fitness is dependent upon my honest, respectful and considerate use of the facilities as a guest.

I HAVE READ AND SIGNED THE WAIVER AND RELEASE FORM (ON THE BACK OF THIS FORM) AND I WILL REVIEW THE RULES AND REGULATIONS POSTED BEFORE USING Action Fitness.

Signature: _____ Date: ____ / ____ / ____

>>>> PLEASE REVIEW AND SIGN WAIVER AND RELEASE ON BACK OF PAGE. THANK YOU! >>>>