



IGLEHART HALL KEYCARD REGISTRATION St. John's College | Annapolis, Maryland

Keycard effective from date of payment received through July 1, 2019

Name: _____

Email (for gym-hour updates, renewal reminders, etc.): _____

I'd like to receive gym updates

Affiliation with St. John's:

Undergraduate Alumnus Year: _____ Campus: AN ___ SF ___

Graduate Institute Alumnus Year: _____ Campus: AN ___ SF ___

Spouse or Partner of Faculty, Staff, or Student

 Spouse Name: _____

Child of Faculty, Staff, or Student

 Birthdate: _____

 Parent Name: _____

Other

 Describe: _____

I acknowledge that I have received and read the Iglehart Hall Admittance Policy, and I agree to be bound by its terms, including a.) that permission to use this keycard and the St. John's College athletic facilities may be revoked at any time at the discretion of the Athletics and Recreation Coordinator, the Assistant Dean, and/or the Dean, b.) that keycard holders may bring up to two guests to the gym at any time, but that each guest must depart the gym with their host. c.) that this keycard must be re-registered each year, and will turn off on June 30 unless another registration fee is submitted.

In addition to the fee for gym access, I would like to donate to the college to support Student Life, including Athletics. I acknowledge that I am receiving no benefit for this donation and that the additional amount may be tax deductible.

 Amount: _____

Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

FOR ADMIN USE ONLY

Amount Received: _____

Received by: _____