

HUMAN RESOURCES DEPARTMENT

City of Burlington

179 South Winooski Avenue, Suite 100, Burlington, VT 05401

Voice (802) 865-7145 Fax (802) 864-1777

Vermont Relay: 7-1-1 or 800-253-0191

2015 GYM MEMBERSHIP PAYROLL DEDUCTION AGREEMENT

l,, w	vish to enroll in:
(Employee printed name)	
Membership Location (check one) Sports and Fitness Edge Greater Burlington YMCA Snap Fitness Synergy Marketplace Fitness	Membership Type (check one) Single Two-person (both adults) Family
Effective January 1, 2015 to December 31, 201	5. (Employees MUST renew memberships annually).
amount sufficient to repay the City for its advan	ngton to deduct from my earnings each pay period an ace payment of my annual membership and/or joining aken for 26 pay periods, if I am paid weekly OR 13 pay h the first payroll in January.
My annual membership fee will be \$	·
The weekly/biweekly deduction will be \$.
	g the deduction period noted above, I authorize the Citrearnings or unused benefits, the balance due to the City
Employee Signature	Date
Human Resources I certify that the figures above are accurate.	Date