

Homer Inn & Spa: Membership Agreement

This membership agreement between HOMER INN & SPA and ______(Member name) shall be effective on the date of ______. The fee for membership is **\$39.00** a month. Monthly payments for this membership shall be billed in advance on the 1st day of each month.

Membership Term:

- 1. The membership period shall be month-to-month and may be cancelled with 30 days' written notice.
- 2. This Agreement is personal to the member and may not be assigned, transferred or otherwise disposed of by the member.

Membership Benefits:

- 1. One (1) hour of thermal spa each month.
- 2. 10% off massage services.
- 3. 10% off room reservations.
- 4. 10% off additional thermal spa visits.
- 5. Early access to special events.
- 6. Referral bonus: For every new member you refer outside of your immediate household, receive a voucher for 50% off one (1) thermal spa visit of up two (2) hours.

Automatic Payment Agreement:

- 1. Monthly membership payments shall be made in advance by direct debit from the member's designated credit/debit account. This information will be kept on file by HOMER INN & SPA.
- 2. You are responsible to ensure that the credit card number on file with HOMER INN & SPA is valid so that the monthly fee can be charged to that card. You may change the credit card provided at any time, provided, however, that it is your responsibility to make sure that there is always a valid credit card number on file with HOMER INN & SPA for payment of the Monthly Fee. If there is not a valid credit card on file with HOMER INN & SPA at the time the Monthly Fee is charged to that card and one is not provided within ten days after the regularly scheduled date for payment, HOMER INN & SPA may exercise any and all rights available to it, whether under this agreement or under applicable law, which may include, but are not limited to, suspension of your membership in the membership until such payment is made, assessing a late payment fee of \$25.00, and/or terminating this Agreement.
- 3. HOMER INN & SPA reserves the right to review subscriptions periodically. Members will be given at least a 30 days' notice in writing of any changes, which include: (i) any increase in membership fee, (ii) change in date of automatic withdrawal.



Termination or Suspension of Membership:

- 1. Please be advised that you have the right to cancel this Agreement In writing with 30 days' written notice.
- 2. HOMER INN & SPA reserves the right at any time to cancel or suspend the membership of any member in the event of the following:
 - a. The member commits a serious breach of this Agreement and/or HOMER INN & SPA Policies https://www.homerinnandspa.com/policies
 - b. Where any monies are due to HOMER INN & SPA by the member remain unpaid for 30 days after its due date for payment.
 - c. If HOMER INN & SPA terminates for any reason, they reserve the right to retain any monies received to cover any reasonable costs they have incurred as a result.
- 3. Membership may be suspended for up to three months on medical grounds. A medical certificate may be required. Members will be liable to pay a one-time administration charge of **\$25** to suspend their membership.

Terms and Conditions:

- 1. HOMER INN & SPA Gift Cards may not be redeemed to pay any portion of the membership fee. The membership fee cannot be combined with any other promotion and/or discount.
- 2. There is no limit to the number of referral bonuses a member can earn each month. However, referral bonus discounts must be redeemed within the next monthly membership period, or they expire. For example, referral bonuses earned January 1st-31st expire February 28th. Referral bonus discounts may not be redeemed for massage services, room reservations, food, or retail items.
- 3. HOMER INN & SPA reserves the right to vary, add, or eliminate any of the services provided from time to time.
- 4. HOMER INN & SPA reserves the right to close or modify facility hours with or without notice.



Print Name:	Date:
Signature:	
Contact Phone Number:	
Email Address:	
Card Authorization:	
Type of Card:	Card Number:
Expiration Date:/	CCV Code (three digits on back of card):
Cardholder Name:	
Billing Address:	City/State/Zip Code:

Signature:_____Date:_____