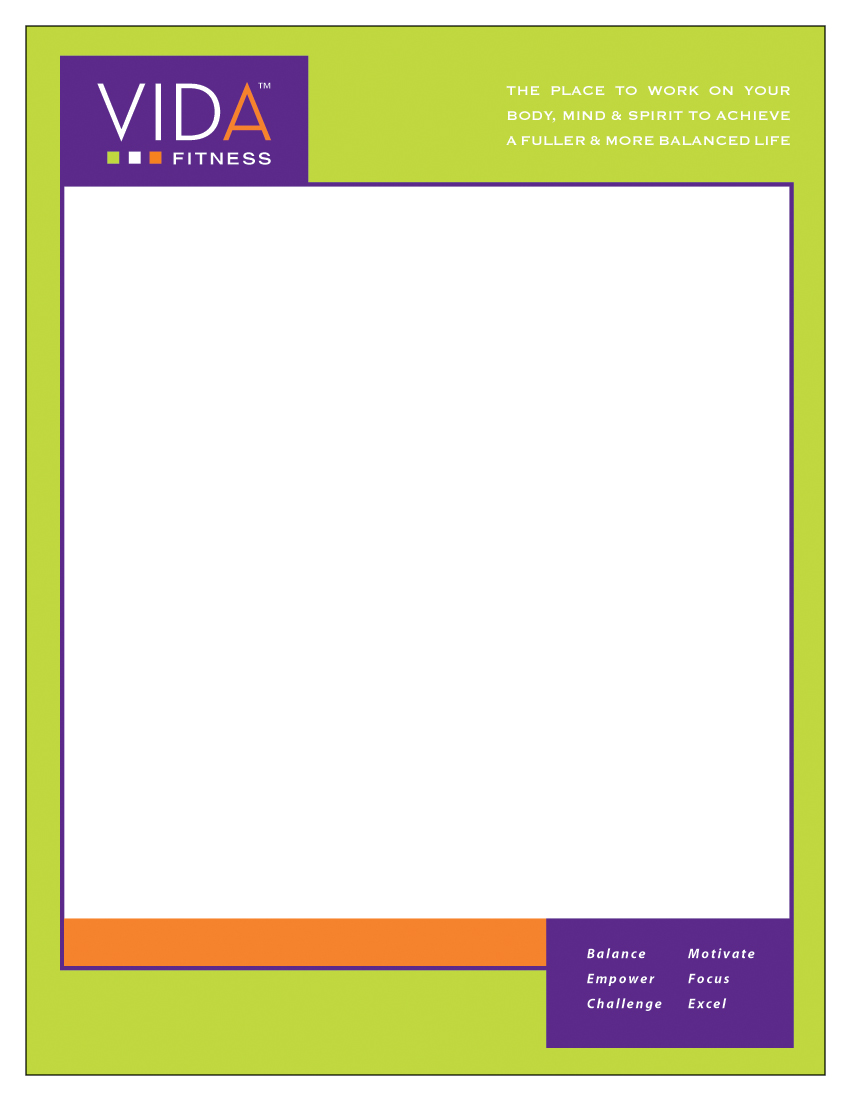
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**VIDA Fitness Verizon - Request for Corporate Membership Agreement**

Please complete the following form and return to the Verizon Sales Office at your earliest convenience, located at 601 F St. NW, or email to Carlos Fenwick at [CFenwick@vidavitness.com](mailto:CFenwick@vidavitness.com)

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Member Referrer (Who told you about VIDA?): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Membership Type Desired (check your desired option):**

* Month-to-Month $129 \_\_\_\_\_
* All Access (Year Long) $99 \_\_\_\_\_\_
* Individual Access (Year Long) $92 \_\_\_\_

1. **Choose one of our Value Added Programs (check your desired option):**

* 3-Pack of Personal Training ($150) \_\_\_\_\_
* 6-Pack of TRX ($150) \_\_\_\_\_
* 5-Pack of Pilates Reformer ($150) \_\_\_\_\_
* Nutritional Analysis ($150) \_\_\_\_\_
* AuraSpa Gift Card ($150) \_\_\_\_\_
* 6-Pack of Boot Camp ($150) \_\_\_\_\_

**Credit Card Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expiration Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**