

# RECREATION SERVICES

## LIED USER AND REC PROGRAM PASSES

### BEYER & STATE LOCKER RENTALS

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

ISUCard #: 600957 \_\_\_\_\_ GENDER:  MALE  FEMALE

Address: \_\_\_\_\_  
Campus or Local including City, State and Zip Code

Day Phone #: \_\_\_\_\_ E-mail: \_\_\_\_\_

I understand that my user pass and/or locker expires on the date indicated below. If not renewed, I understand that my user privileges end, and/or I will forfeit the use of my locker; my locker will be cleared; and I will be billed for any missing state property (i.e. lock, towel, rec roll). After 30 days, my personal items of significant value will be sent to ISU Asset Recovery. Recreation Services is not responsible for lost or stolen items. I understand that my ISUCard, with the current version number, is required for access to the Lied facility.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*NOTE: Due to maintenance, renovation, facility cleaning projects, and special recreational activities, specific activity and/or service areas of the facilities may be restricted to limited access or be closed entirely for varying periods of time. When possible, Recreation Services will post advance notice of pending service disruptions and activity area closures.*

### FOR OFFICE USE ONLY

Verify ISUCard status. Mark appropriate box below.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Student (Locker Only)  | <input type="checkbox"/> Student Spouse            | <input type="checkbox"/> Student Dependent (18+)   |
| <input type="checkbox"/> Faculty/Staff/Post Doc   | <input type="checkbox"/> Fac/Staff/Post Doc Spouse | <input type="checkbox"/> Fac/Staff Dependent (18+) |
| <input type="checkbox"/> Retired Faculty/Staff  | <input type="checkbox"/> Retired Fac/Staff Spouse  |  |
| <input type="checkbox"/> Affiliate  |  |  |
| <input type="checkbox"/> Alumni Association Member  |  |  |
| <input type="checkbox"/> Continuing Student (Locker Only)..... Must have current Continuing Student Pass.                         |  |  |
| <input type="checkbox"/> Special Program ..... Restrictions Apply. Must be verified by Recreation Services Administrative Office. |  |  |
| <input type="checkbox"/> NO ISU Card - Community Member   |  |  |

Comments: \_\_\_\_\_

<u>LIED USER &amp; REC PROGRAM PASSES</u>	<u>SEMESTER</u> Expires 12/31/09	<u>ANNUAL</u> Expires 8/15/10	<u>Weekly</u>	<u>Monthly</u>
Faculty/Staff-Retiree-Affiliate	<input type="checkbox"/> \$ 58	<input type="checkbox"/> \$129	<input type="checkbox"/> \$ 26	<input type="checkbox"/> \$ 36
Alumni Association Member	<input type="checkbox"/> \$128	<input type="checkbox"/> \$283	<input type="checkbox"/> \$ 26	<input type="checkbox"/> \$ 36
Rec Program: Student Spouse/Dep.	<input type="checkbox"/> \$ 67	<input type="checkbox"/> \$167	<input type="checkbox"/> \$ 26	<input type="checkbox"/> \$ 36
Rec Program: Special Program	<input type="checkbox"/> \$ 67		<input type="checkbox"/> \$ 26	<input type="checkbox"/> \$ 36

Exp. Date: \_\_\_\_\_

<u>BEYER &amp; STATE LOCKERS</u>	<u>SEMESTER</u> Expires 12/31/09	<u>ANNUAL</u> Expires 8/15/10	<u>Other</u>
Locker and Towel	<input type="checkbox"/> \$35	<input type="checkbox"/> \$77	<input type="checkbox"/> \$10 Replacement Lock
Rec Roll	<input type="checkbox"/> \$35	<input type="checkbox"/> \$77	<input type="checkbox"/> \$ 5 Replacement Towel
Extra Towel	<input type="checkbox"/> \$10	<input type="checkbox"/> \$20	<input type="checkbox"/> _____
Extra Socks	<input type="checkbox"/> \$ 2	<input type="checkbox"/> \$ 4	

Locker Information: MEN'S Locker #: \_\_\_\_\_  Beyer Hall  (Lied)  
 WOMEN'S Locker #: \_\_\_\_\_  Beyer-117  Beyer-118  State  (Lied)

**TOTAL DUE:** \_\_\_\_\_ **RecTrac Receipt #:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

Paid by:  Cash  Check # \_\_\_\_\_  Visa  MC  Payroll Deduct  Dept. Charge