



USDA EMPLOYEE SERVICES & RECREATION  
ASSOCIATION SOUTH FITNESS CENTER  
**LOCKER AGREEMENT**



LOCKER #: \_\_\_\_\_

COMBO: \_\_\_\_\_ (Optional)

NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

AGENCY: \_\_\_\_\_

- I understand that there are NO REFUNDS on locker rental fees.
- I understand that I am responsible for purchasing my own lock.
- I understand that I am to use ONLY the locker I am renting.
- ESRA is not responsible for lost or stolen items from lockers or the locker room.
- I agree that I am required to notify the ESRA Fitness Center in writing or by email upon cancelation of my locker by the end of business (7:00pm) the day my locker expires.
- I understand that if I do not renew my expired locker by the close of business on the expiration date my credit card on file will be charged to renew the locker membership.
- I understand that if payment is two weeks past due on an expired locker that the lock and my belongings will be removed at my own expense.
- I agree that lockers are to be used for personal belonging related to fitness and personal hygiene and under no circumstances will I use the locker to store unlawful or hazardous materials.

I have read and understand the above statements.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

EXPIRES: \_\_\_\_\_

EXPIRES: \_\_\_\_\_

EXPIRES: \_\_\_\_\_