



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

EVERYTHING  
IS BETTER  
WHEN WE  
COME  
TOGETHER  
2019



## “Share the Y” Referral Program

### 3 EASY STEPS

1. Tell your friends and family about the Y.
2. Fill out a “Share the Y” referral form and give to a friend.
3. If your friend fills out the coupon, brings it in to the Tuscarawas County YMCA, **YOU receive 1 FREE month of membership!**

Offer must be redeemed in person, with completed coupon.

#### Terms and Conditions:

Members must have been an active Tuscarawas County YMCA Member for at least 30 days to participate in this program. New Member must remain a member for at least 90 days for award to be received by referring member. Members may refer up to 3 referrals per calendar year. Referral form must be received on day of purchase and be on file to qualify for promotion. Youth memberships, program members, financial assistance, payroll deducts, SilverSneakers®, Silver&Fit, Renew Active (or other special membership type) and YMCA staff are excluded. Valid at the time of new Y member join only. Must be 18 years of age or older. Other restrictions and/or exclusions may apply.

**TUSCARAWAS COUNTY YMCA** 600 Monroe Street, Dover 330-364-5511 [www.tuscymca.org](http://www.tuscymca.org)



**EVERYTHING IS BETTER WHEN WE COME TOGETHER**  
**2019 "Share the Y" Referral Program**

**3 EASY STEPS**

1. Tell your friends and family about the Y.
2. Fill out a "Share the Y" referral form and give to a friend.
3. If your friend fills out the coupon, brings it in to the Tuscarawas County YMCA, **YOU receive 1 FREE Month of Membership!**

Offer must be redeemed in person, with completed coupon.

**Terms and Conditions:**

Members must have been an active Tuscarawas County YMCA Member for at least 30 days to participate in this program. New Member must remain a member for at least 90 days for award to be received by referring member. Members may refer up to 3 referrals per calendar year. Referral form must be received on day of purchase and on file to qualify for promotion. Youth memberships, program members, financial assistance, payroll deducts, SilverSneakers®, Silver&Fit, Renew Active (or any other special membership type) and Y staff are excluded. Valid at the time of new Y member join only. Must be 18 years of age or older. Other restrictions and/or exclusions may apply.

**TUSCARAWAS COUNTY YMCA**  
 600 Monroe Street, Dover 330-364-5511 [www.tuscymca.org](http://www.tuscymca.org)



**2019 "Share the Y" Referral Program**

Refer a friend. Share this coupon with a friend and if they join and remain a member for at least 90 days you will receive a **FREE MONTH of membership.** Visit [www.tuscymca.org](http://www.tuscymca.org) Membership Overview for more referral details.

**Member Information**

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**NEW Member Information**

New Member Name \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**TUSCARAWAS COUNTY YMCA**  
 600 Monroe Street, Dover 330-364-5511 [www.tuscymca.org](http://www.tuscymca.org)



**2019 "Share the Y" Referral Program**

Refer a friend. Share this coupon with a friend and if they join and remain a member for at least 90 days you will receive a **FREE MONTH of membership.** Visit [www.tuscymca.org](http://www.tuscymca.org) Membership Overview for more referral details.

**Member Information**

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**NEW Member Information**

New Member Name \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**TUSCARAWAS COUNTY YMCA**  
 600 Monroe Street, Dover 330-364-5511 [www.tuscymca.org](http://www.tuscymca.org)



**2019 "Share the Y" Referral Program**

Refer a friend. Share this coupon with a friend and if they join and remain a member for at least 90 days you will receive a **FREE MONTH of membership.** Visit [www.tuscymca.org](http://www.tuscymca.org) Membership Overview for more referral details.

**Member Information**

Your Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

**NEW Member Information**

New Member Name \_\_\_\_\_ Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**TUSCARAWAS COUNTY YMCA**  
 600 Monroe Street, Dover 330-364-5511 [www.tuscymca.org](http://www.tuscymca.org)