STRAWBERRY
RECREATION DISTRICT

Tennis Pass Type

☐ Resident ☐ Non-Resident
☐ 2011 Pass Holder
Annual ☐ (1/1/12 - 12/31/12)
6-Month ☐ (7/1/12 - 12/31/12)
3-Month ☐ (10/1/12 - 12/31/12)

Annual Additional Persons
_____ X $40 = $ _____
6-Month Additional Persons
_____ X $30 = $ _____
3-Month Additional Persons
_____ X $25 = $ _____

Application for Tennis Court Use Privileges

FOR MEMBERSHIP SEASON: January 1 – December 31, 2012

_____ _____
Last Name First Name

_____
Address

_____ _____ _____
City State Zip

(___)_____ (___)_____ (___)_____
Home Phone Cell Phone Business Phone

(___)_____ _____
Fax E-mail

Additional Household members on pass:

1. _____ 3. _____

2. _____ 4. _____

OFFICE USE ONLY

_____ _____
Date Received Key #(s)

_____ _____
Fee paid Received by

Number of keys issued _____

Cash _____ Check # _____

☐ Visa ☐ MC exp: _____

Card # _____

Agreement Waiver/ Release: Please Read before Signing

In consideration for being permitted by the above district to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the above district (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above person or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

PARENTAL CONSENT: (to be completed and signed by parent/guardian if applicant is under 18 years of age.) I hereby consent that my son/daughter, _____ participate in the above activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned above free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICT AND I SIGN IT OF MY FREE WILL.

PHOTOS: SRD reserved the right to photograph facilities, activities, and program participants for potential future use. All photos will remain the property of Strawberry Recreation District and may be used for publicity or promotional purposes only.

Signature _____

Print Name _____

Date _____