



DAILY PASS FOR MINORS AGES 13-17

- This form must be filled out by parent or legal guardian.
- Parent must also bring proof of residency to receive Peoria Discount rate.

MINOR INFORMATION:

NAME: _____ CONTACT # : _____
 BIRTHDATE: _____ ADDRESS: _____ CITY: _____ ZIP CODE: _____

PARENT OR LEGAL GUARDIAN INFORMATION:

NAME: _____ CONTACT # _____

Parent/Legal guardian must initial in understanding of the following policies:

_____ Minors ages 13-14 must complete a fitness orientation prior to gaining access to the fitness floor and must be supervised by a parent or legal guardian.

_____ Rio Vista Recreation Staff reserve the right to dismiss, suspend, and/or ban a minor from the center for violating policies.

Parent/Legal guardian must read and sign in understanding of waiver:

Rio Vista Recreation Center Climbing Wall Waiver

I AM AWARE THAT ROCK WALL CLIMBING INCLUDES CERTAIN RISKS, INCLUDING BUT NOT LIMITED TO THE RISK OF SERIOUS INJURY OR DEATH. I AM VOLUNTARILY PARTICIPATING IN THIS ACTIVITY WITH KNOWLEDGE OF THE DANGERS INVOLVED, AND HEREBY AGREE TO ACCEPT FULL RESPONSIBILITY FOR THE RISKS INVOLVED.

In consideration of being allowed to use the rock climbing wall at the Rio Vista Recreation Center, I acknowledge and agree to the following:

- **Hazards of Climbing.** Rock wall climbing is an inherently dangerous activity.
- **Climbing is Voluntary.** The use of the Rio Vista rock wall, facilities, equipment or apparatus is voluntary with complete and full understanding that such usage involves hazards and dangers.
- **Conduct.** I will obey and comply with all rules, regulations, or instructions of the Recreation Staff in charge of the wall.
- **Equipment.** Any equipment or gear that I may receive, rent, or borrow from the Rio Vista Recreation Center, I use at my own risk.

Waiver of Liability & Photo/Video Consent

By signing, I hereby release and forever discharge the City of Peoria, an Arizona municipal corporation (“City”), its elected and appointed officials, directors, officers, boards, commissions, agents, representatives, servants, and employees, and any and all other persons, firms, or corporations who are or might be liable (“Released Parties”) from any and all claims of any kind or character which I or my child have or may have against them due to my participation, or my child’s participation, in programs, services or activities at the City’s Rio Vista Recreation Center (“Activities”). This waiver includes all damages, losses, costs, expenses, and injuries that allegedly occur during or arising out of the Activities. In that regard, I covenant to indemnify, defend, and hold harmless the Released Parties to the fullest extent permitted by law from any loss or damages, including reasonable attorneys’ fees and litigation expenses, which may be incurred by the Released Parties in the event any such claims are asserted against them or any of them. I understand that medical claims and health insurance for myself and my child are my responsibility. This waiver does not extend to any such claim or liability that is caused by the sole and exclusive intentional acts or gross negligence of the City or its officers, employees, or agents. I give my consent to the City to take photos/video of me and my child to be used by the City for program promotion.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND THIS AGREEMENT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE. I AM VOLUNTARILY SIGNING THIS AGREEMENT.

Parent/Guardian Signature: _____ Date: _____

| | |
|-------------------------|-----------------------|
| For staff use only | |
| Date Processed & Filed: | Processed Staff Name: |