

## Pass Holder Application Form RIO VISTA RECREATION CENTER

8866-A West Thunderbird Rd. Peoria, AZ. 85381

CTART RATE				ONLY: (Please Init	al when items are completed)		
START DATE:			Initials:	Date:	Wristband/Climbing Alerts		
Page Tymes					Wisbard/Climbing Alerts		
Pass Type:	D (44)				Waivers initialed and signed		
☐ Peoria Resident (Proof of Residency	' Kequirea*)				Minor Waiver entered		
☐ Non-Resident							
☐ One Month (no contract)							
☐ 3 Months (Contract, Paid in Full)							
☐ 6 Months (Contract, Paid in Full)							
☐ Annual (Contract, Paid in Full)							
Annual Monthly (Contract, EFT Payments) (Must provide voided check and pay first and last month's payment.)							
The Center offers a scholarship for Peori	a families	Would you like to do	nate \$1.00	to the Rio Vista	a Scholarship fund? YES OR NO		
☐ Individual Youth Ages 5-18.		2-Person ( <i>reside at tl</i>	he same ad	dress)			
☐ Individual Young Adult Ages 19-24.		Family (Up to 6 mem	bers who a	ll reside at the .	same address.)		
☐ Individual Adult Ages 25-61		Individual Senior <i>Age</i>	es 62 and up	D.			
Main Pass Holder Information:							
First Name: Last N	Name:		Email: _				
Address:		_Suite/Apt.:	_ City:				
State: Zip Code:	Birth	Date:	Ph. Nun	nber:			
Emergency Contact:		Relationship:		Ph. Numl	oer:		
For 2-Person or Family Pass, Please list members: (All 18+ members must provide proof of residency and sign waiver.)							
Name:	Birth Date:	T					
Name:	Birth Date:						
Name:	Birth Date:	·					
Name:	Birth Date:	l					
Name:	Birth Date:	:					
Kids' Corner Pass (Kids' Corner is included	with an Ann	ual Membership. Age	s 18 month	ns-7years old)			
Name:	Birth Date:	l	_				
Name:	Birth Date:						
Name:	Birth Date:	:					
Name:		·					
Decident Date of the second se		and limite of the City of December					

**Resident Rate:** If where you permanently reside or live Proof of residency is required at the time of registration.

	WAIVER OF						
Adult 1 Adult 2	Each adult is required to	initial and sign below.					
<u> </u>	gth, flexibility and aerobic exercise, including the use of equipment						
	and free weights, are a potentially hazardous activity.						
<del></del>	·	es a risk of injury and even death and that I am voluntarily					
		equipment with the knowledge and risk involved.					
<del></del>		cal conditions that could interfere with my safety or else I of all risks that may be created, directly or indirectly by any such					
	condition.	of all risks that may be created, directly of mulicetly by any such					
		understand that staff will contact emergency personnel on my behalf or on behalf of my minor child					
	should a medical emergency arise.						
<del></del>	enter advises patrons to consult a physician prior to beginning an						
	exercise program.	and a file of the control of the con					
<del></del>	·	that no person under the age of 13 may use the fitness equipment. I understand a					
fitness orientation is advised for all patrons and required for ages 13-14. After which parent/legal guardian must be present on the fitness floor with a 13-14 year old.  I understand that all children ages 18 months-7 years must be accompanied by an advised by advised by an advised by an advised by an advised by advised by advised by a advised by a advised by a advised by							
					·	-	I understand that Kids' Corner is included in Annual memberships
	only. I am aware of the Kids' Corner's h	•					
·	_ I understand that a 16/17 year old may	accompany a child 12 and under to the facility.					
<del></del>		ies of the Rio Vista Recreation Center, including providing accurate					
		nd household members, can result in suspension from the facility					
	and loss of fees.	-refundable and that I am committed to the length of term chosen					
·	on this contract, early cancellation is not						
appointed officials, director persons, firms, or corporar or my child have or may hold the fullest extent permitted be incurred by the Releast medical claims and health liability that is caused by the give my consent to the Circuit Rio Vista Recreation C I am aware that rock death. I am voluntari accept full responsibil Recreation Center, I acknowledge Hazards of Climbin Climbing is Volunt understanding that second control of the Conduct. I will ober	ors, officers, boards, commissions, agents, retions who are or might be liable ("Released have against them due to my participation, of Center ("Activities"). This waiver includes of the Activities. In that regard, I covenanted by law from any loss or damages, including sed Parties in the event any such claims are insurance for myself and my child are my results that sole and exclusive intentional acts or greatly to take photos/video of me and my child the enter Climbing Wall Waiver (Climbers wall climbing includes certain risks by participating in this activity with ity for the risks involved. In considerate owledge and agree to the following:  ng. Rock wall climbing is an inherently darwary. The use of the Rio Vista rock wall, fauch usage involves hazards and dangers. y and comply with all rules, regulations, or	including but not limited to the risk of serious injury or knowledge of the dangers involved, and hereby agree to ion of being allowed to use the rock climbing wall at the Rio Vista					
contents of the City of I am aware that by sig signing this agreemen	Peoria Waiver of Liability and Climbing this agreement I am waiving cent.	nat I have read, understood and agreed to be bound by the ng Wall Waiver on behalf of myself and/or any youth listed. tain legal rights, including the right to sue. I am voluntarily waiver as it pertains to self and all minor children.					
	2:						
	2:						
1							