



Teens Summer Scholarship Application

RIO VISTA RECREATION CENTER

8866-A West Thunderbird Rd. Peoria, AZ 85381

START DATE: _____

Passes can start May 24, 2019 or after

For Staff Use Only:

- Verified Eligibility
- Verified Age

Applications will be accepted starting May 3rd 2019. Applications will be reviewed by management and applicants will be notified via email by May 15th of approval.

Eligibility Requirements:

- **City of Peoria Resident** (Proof of residency required)
- **Must Be 13-17 years of age** (Birth Certificate required)
- **2 Children per household**
- **Applicants must participate in a State or Federal assistance program: (check all that apply)**
 - Aid to Families with Dependent Children (AFDC)
 - Supplemental Security Income (SSI)
 - Supplemental Security Disability Insurance (SSDI)
 - Reduced Lunch Program/ Free Lunch Program
 - Subsidized Housing (HUD)
 - Department of Economic Security (DES)

Main Pass Holder Information:

First Name: _____ Last Name: _____

Address: _____ Suite/Apt.: _____ City: _____

State: _____ Zip Code: _____ Birth Date: _____ Gender: _____

HM: (____) _____ Cell: (____) _____ WK: (____) _____

Email: _____

Emergency Contact Name: _____ Relationship: _____

HM: (____) _____ Cell: (____) _____ WK: (____) _____

Activities Include:

** Game Room * Climbing Wall * Racquetball * Fitness Floor * Gymnasium * Youth Activities*

(Review age access chart for age restrictions regarding activities)

WAIVER OF LIABILITY

Parent/Legal Guardian and Teen must initial that they understand the policies

- _____ I understand and am aware that strength, flexibility and aerobic exercise, including the use of equipment and free weights, are a potentially hazardous activity.
- _____ I understand that fitness activity involves a risk of injury and even death and that I am voluntarily participating in these activities and using equipment with the knowledge and risk involved.
- _____ I certify that I have no medical or physical conditions that could interfere with my safety or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly by any such condition.
- _____ I understand that staff will contact emergency personnel on my behalf or on behalf of my minor child should a medical emergency arise.
- _____ I understand the Rio Vista Recreation Center advises patrons to consult a physician prior to beginning an exercise program.
- _____ I understand that some areas of the facility have an age restriction.
- _____ **I understand that a fitness orientation is advised for all patrons and required for ages 13-14. After which a parent/legal guardian must be present on the fitness floor with a 13-14 year old.**
- _____ I agree that failure to abide by the policies of the Rio Vista Recreation Center, including providing accurate information regarding residency, ages, and household members, can result in suspension from the facility and loss of fees.
- _____ **APPLICANTS ARE REQUIRED TO ATTEND AN AVERAGE OF 2 TIMES PER WEEK.**

Waiver of Liability

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.

Rio Vista Recreation Center Climbing Wall Waiver (Climbers must be 5 years of age or older.)

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.

I, as the participant(s) certify that my signature signifies that I have read, understood and agreed to be bound by the contents of the City of Peoria Waiver of Liability and Climbing Wall Waiver on behalf of myself and/or any youth listed. 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.

Teen Participant Signature: _____ Date: _____

PARENT/GUARDIAN SIGNATURE (on behalf of the minor youth) _____ Date