# Season Pool Pass Registration Form

PLEASE FILL OUT THIS FORM COMPLETELY AND DROP OFF, EMAIL, MAIL OR FAX IT ALONG WITH PROOF OF RESIDENCY TO:

#### EMAIL: REGISTRATION@BARRINGTONPARKDISTRICT.ORG

ADDRESS: BARRINGTON PARK DISTRICT, 235 LIONS DRIVE, BARRINGTON IL 60010 FAX: (847) 381-8794

- All adults in the same household must prove residency to be included on the Family Pool Pass. No exceptions.
- For both In and Out-of-District patrons, proof of residency within the same household, may be validated by a current driver's license, state i.d., passport, utility bills, tax bills, lease/rental agreements, etc.
- EVERYONE IS REQUIRED TO HAVE A POOL PASS. Children 2 years and younger will NOT be charged.

### Family Information In-District Out-of-District

Please print. Fill out the information below for your entire family; then list each participant separately in the Registration Information section. Proof of residency may be required.

Household Last Name	Primary Guardian First Name	Secondary Guardian First Name		
Address	City	State	Zip	
Home Phone	Cell Phone (State Whose Number)	Work phone (State Whose Number)		
E-mail Address				
Emergency Contact	Phone	Relationship		
<b>0</b> <i>1</i>	will be made to contact a parent at home, at work and via trict will contact the alternate name listed above.)	cell phone.		

### **Family Member Registration Information**

Please list information for EVERY FAMILY MEMBER THAT LIVES IN THE HOUSEHOLD.

Pass Type	Last Name	First Name	Gender	<b>Birth Date</b> (Month/Date/Year)

## **Payment Information**

Total Fee: Payment Method (Che	eck One): 🗌 VISA 🗌 Master Card 🗌 Dis	scover 🗌 American Expr	ess 🗌 Cash 🗌 Check (#:)
	(	) (	/ )
Cardholder Name (Please Print)	Card #	E	Expiration Date
Signature		Date	



# Season Pool Pass Form Cont.: Pool Pass Waiver & Release

### **Important Information**

The Barrington Park District, "Park District," is committed to providing safe aquatic facilities and programs and holds the safety of participants in high regard. The Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors engaged in aquatic activities must recognize that there is an inherent risk of injury.

You are solely responsible for determining if you or your minor child/ward is physically fit and/or adequately skilled for the activities associated with this Pool Pass. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical/aquatic activity.

Please understand and recognize that lifeguards are not responsible for providing supervision or assessing your swimming skills or that of your minor child; rather, lifeguards are responsible for enforcing safety rules and responding to emergencies. Adult pool pass holders and parents of minor pool pass holders are solely responsible for supervision of any and all activities contemplated by this agreement. Additionally, children 9 years of age and younger must be supervised at all times by a responsible person, 16 years of age or older.

#### NEVER LEAVE ANY CHILD WITH POOR SWIMMING SKILLS OR 9 YEARS OF AGE AND YOUNGER, UNACCOMPANIED BY A PARENT OR RESPONSIBLE PERSON, 16 YEARS OF AGE OR OLDER

### **Warning of Risk**

Swimming and other aquatic activities challenge and engage the physical, mental and emotional resources of each participant. However, despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury, including but not limited to drowning, head/brain injury, and spinal cord injury. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming and aquatic activities are hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, failing to follow rules and regulations, failure of lifeguards to locate victims and/or delay in emergency response time, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool or waterslide, inadequate supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, striking one's head on the bottom, slip and falls on the deck or within the locker facility, chemical exposure and all other circumstances inherent to aquatic activities. In this regard, it must be recognized that it is impossible for the Park District to guarantee absolute safety.

## Waiver and Release of all Claims and Assumption of Risk

Please read this form carefully and be aware that in consideration for this Pool Pass, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with use of the Park District aquatic facilities and programs.

I recognize and acknowledge that there are certain inherent risks of physical injury to patrons of aquatic facilities, and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities and programs connected with or associated with this Pool Pass. I further recognize and agree that lifeguards and other aquatic staff are not responsible for supervising my activities or the activities of my minor child(ren) and I agree that I am solely responsible for supervising my minor children and/or assessing whether my children are physically fit and/or adequately skilled for aquatic activities. I additionally agree to supervise any children ages 9 and under at all times.

I further agree to waive and relinquish all claims I, or my minor child/ward may have (or accrue to me or my child/ward) as a result of use of the Park District's aquatic facilities and programs against the Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred as "District").

I do hereby fully release and forever discharge the District from any and all claims for injuries, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with use of the Park District/'s aquatic facilities and programs.

**BARRINGTON PARK DISTRICT PHOTO RELEASE:** I understand that my child/ward or I may be photographed or videotaped while participating in a Barrington Park District program or special event. I give my permission for photos and videotapes of my child/ward or myself to be used to promote the Barrington Park District. Such photos and videotapes will remain the property of the Barrington Park District.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE IMPORTANT INFORMATION, WARNING OF RISK, ASSUMPTION OF RISK AND WAIVER AND RELEASE OF ALL CLAIMS. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Signature of Parent/Guardian or Adult Participant

Date

Waiver required! For insurance purposes, Park District programs and activities require a signed waiver. Patrons WILL NOT be able to participate in classes or programs if the waiver is not signed.