

Pool Pass Application

Information:

Family Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Home Phone: _____

Emergency Contact: _____

Emergency Contact Phone _____

VIP (Check this box for a VIP Pass. A VIP Pass may be used for different people throughout the summer. A passholder must accompany any person using the VIP Pass. Only one VIP Pass may be purchased.)



Bloomington Park District

www.bloomingtonparks.org
(630) 529-3650

Note: A family is defined as 1-2 adults and/or dependent children 21 and younger residing in the same household.

Fee: \$ _____ Date: _____ Entered By: _____

Paid by: Check _____ Cash _____ Credit Card _____

If paying by charge, circle one: VISA MASTERCARD

Cardholder #: _____ Expiration Date: _____

Amount of payment: \$ _____ Authorized Signature: _____

I agree that passes issued to me will be used only by members of my family listed below:

Signature of Applicant: _____

Passes to be issued to:

Passes to be issued to:	Age	Birthdate	Check <input checked="" type="checkbox"/> if Renewal Pass
Adult: _____	_____	_____	<input type="checkbox"/>
Adult: _____	_____	_____	<input type="checkbox"/>
Child: _____	_____	_____	<input type="checkbox"/>
Child: _____	_____	_____	<input type="checkbox"/>
Child: _____	_____	_____	<input type="checkbox"/>
Child: _____	_____	_____	<input type="checkbox"/>

Swim Program

Information:

The Bloomingdale Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Bloomingdale 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 registering for this program must recognize that there is an inherent risk of injury when choosing to participate in the following recreational activities.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities contemplated by this agreement. 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 activity.

Warning of Risk:

Swimming is a sport which challenges and engages 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 cervical spine injury. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming is hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool, poor supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, defective or inadequate equipment, striking one's head on the bottom when using a diving block, slipping or falling on the deck or within the locker facility, chemical exposure and all other circumstances inherent to the sport of swimming. In this regard, it must be recognized that it is impossible for the Bloomingdale Park District to guarantee absolute safety.

Waiver and Release of All Claims and Assumptions of Risk

Please read this form carefully and be aware that in signing up and participating in this program/activity, 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 this program/activity (including transportation services, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program, 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 connected with or associated with this program/activity. 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 participating in this program/activity against the Bloomingdale Park District, including its officials, agents, volunteers and employees.

I do hereby fully release and forever discharge the Bloomingdale Park 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 this program/activity.

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 online or via fax, your online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant's Name: _____

Participant's Signature: _____

Date: _____

PARTICIPATION WILL BE DENIED

If the signature of adult participant or parent/guardian and date are not on this waiver.