

CASA GRANDE COMMUNITY RECREATION CENTER

MEMBERSHIP APPLICATION AND AGREEMENT

PRIMARY MEMBER INFORMATION (Parent/Guardian for Youth Membership)

Last Name: _____ First Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Phone Number: _____ Date of Birth: _____

Employer (Optional): _____

CHECK THE MEMBERSHIP PACKAGE AND CIRCLE THE PAYMENT PLAN

	Membership Type	Per Month Rate		6 Month Minimum Commitment		Annual Minimum Commitment	
		PIF	Debit	Pay-in-Full	Monthly Debit	Pay-in-Full	Monthly Debit
Individual Membership	<input type="checkbox"/> Adult	\$30	\$30	\$150	\$25.00	\$250	\$20.83
		Individual between the ages of 18 and 49					
	<input type="checkbox"/> Senior	\$25	\$25	\$125	\$20.83	\$200	\$16.66
Two or More Person Membership	<input type="checkbox"/> Youth	\$20	\$20	\$100	\$16.66	\$170	\$14.16
		Individual age 3 to 17 (Age 2& under free with paid adult)					
	<input type="checkbox"/> *Family	\$60	\$60	\$300	\$50.00	\$500	\$41.66
Additional Member Information		Up to two adults and dependent children living in the same household. Dependent children include children eighteen and over who are enrolled in college, max dependent age is 25.					
	<input type="checkbox"/> *Couple	\$50	\$50	\$250	\$41.66	\$440	\$36.66
	<input type="checkbox"/> *Sr. Couple	\$45	\$45	\$230	\$38.33	\$375	\$31.25
	Relation (Dependents):	Name:			Birthdate	Gender	
	<input type="checkbox"/> Non-Dependent Add-ons	Individuals permanently living in the household can be added to a family, couple, or senior couple membership for \$5 per month per person.					
	Non-Dependent Add-ons	Name:			Birthdate	Gender	

Wellness Programs for Medicare Supplemental Insurance or Employer Based

Patrons with a wellness program through a Medicare supplemental insurance program or an employer wellness program are required to provide a confirmation code for eligibility verification.

- Silver Sneakers or Prime: Confirmation #: _____ (16 digit number)
- Renew Active or Rally/One Pass: Confirmation #: _____
- Silver N Fit or Active N Fit Confirmation #: _____

Waiver and Release:

I have read this form carefully and are aware that in signing up and participating in this Casa Grande Recreation Center's programs and/or activities (Activities), I assume all risks and legal liability for all Activities that I, or my minor child, participate in. Additionally, I, and anyone authorized to act on my behalf, agree to release & forever discharge the City of Casa Grande ("City"), their officials, directors, agents, officers, boards, commissions, representatives, servants, employees, and persons acting in any capacity of their behalf ("Released Parties") from any and all claims of any kind which my child or I have or may have, against the City and/or Released Parties due to my, or my child's participation in the Activities. This waiver includes all injuries, including death, damages, expenses, and losses which I, or my minor child, might sustain as a result of participating in any and all Activities. I recognize and acknowledge that there are certain risks of physical injury while participating in the Activities, and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity, that my minor child or I may sustain as a result of said participation. I understand that medical claims and health insurance for myself and my minor child are my sole responsibility.

I further acknowledge that if I elect to use any area or equipment in Casa Grande Community Recreation Center I am aware that I am doing so at my own risk. I agree to read and follow all safety signs and warnings. I acknowledge that it is my responsibility to ensure that I am using the equipment properly, using proper exercise techniques in a manner it is intended to be used, and exercising within my physical limitations to reduce the risk of injury. I further acknowledge that the Casa Grande Community Recreation Center staff is available for assistance upon my request by appointment to help answer question, for equipment orientations, and other services.

I acknowledge that I am solely responsible for determining if I, or my child, are physically fit and/or skilled for the Activities contemplated by this agreement. I understand that 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. I understand that despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program and I, understand that not all hazards and dangers can be foreseen. I understand that certain risks, dangers and injuries due to acts of God, inclement weather, slipping, falling, equipment failure in supervision, premise defects and all other circumstances inherent to recreational activities/programs exist. In this regard, I recognize and acknowledge that it is impossible for the City of Casa Grande to guarantee absolute safety.

The Novel Coronavirus, COVID-19, is an extremely contagious virus that spreads easily. Federal and State officials recommend physical distancing and good sanitation measures to help limit the spread. COVID-19 can lead to several illness, personal injury, permanent disability and even death. While the City may implement measures to help slow the spread of this disease, participating in programs or using shared facilities can still increase your risk of contracting COVID-19 and the City in no way warrants that infection or injury will not occur when using any facility. By entering this facility, you voluntarily assume all risks, including the possibility of contracting COVID-19.

Membership Cancellation and Renewal Policy

Cancellation Policy – Membership contracts that have fulfilled their six or twelve-month commitment are eligible for cancellation. Contracts that have NOT fulfilled their six or twelve-month commitment may cancel their membership contract must pay the shortfall between the regular “monthly pass” and their current discounted rate. If an individual is unable to continue their membership because of death or permanent disability (includes medical reasons provided on a doctor's note), the member will be relieved from their membership contract. Members agree to give a minimum of 30-day written notice of their intent to terminate the membership. Any member who is thirty (30) days late with payment may be terminated at the discretion of the Casa Grande Community Recreation Center.

Membership Renewal Policy - Members who have selected a monthly bank debit will automatically have their membership renewed at the current membership rate. To renew a paid-in-full membership, payment will need to be received before the contract expiration date.

Additional Membership Agreement Terms:

Valuables and Personal Property: Members are asked not to bring valuables into the Casa Grande Community Recreation Center or on its premises. The Casa Grande Community Recreation Center management and employees are not responsible for storage, safekeeping, or damage of member's property. The Casa Grande Community Recreation Center is not responsible for lost or stolen goods.

Damages: The cost to repair damage to the Casa Grande Community Recreation Center property by a member, member's guest and/or dependent children shall be paid by the undersigned.

Suspension of Membership: The Casa Grande Community Recreation Center has the right to suspend any membership due to non-payment of dues, for violation of rules or policies, or for behavior deemed inappropriate for the facility.

****For a complete list of all membership rules, policies, and patron code of conduct, please contact the front desk of The Casa Grande Recreation Center.***

By signing this Application and Agreement, I acknowledge that I have read, understood, and agree to be bound by the contents of this Application and Agreement and all of its terms, including the Waiver and Release section. I fully understand the risks involved in the Activities and agree that I will exercise caution and take all steps necessary to avoid injury. I further agree, without any right of payment or editing, to the use of images of me and/or my minor children, including reproduction of photos, video film, audio, or other reproduction, by the City of Casa Grande for dissemination in all types of media for public relations purposes. I have also read and understand the registration and Refund information.

Primary Member Signature

Date