

Employee Initials: _____ Receipt # _____ Rec 1 Receipt # _____ Expiration: _____



Bennett Park and Recreation Punch Card Registration Form

First Name _____ Last Name _____

Home Phone (____) _____ Birthday _____ Age _____

Cell Phone (____) _____ Cell Phone Carrier _____

Emergency Contact- Name _____ Emergency Contact Phone (____) _____

PHYSICAL Address _____ County _____

City _____ State _____ Zip Code _____ Email _____

Daily Utilization

Basic use of the facility, basketball courts, weight room, cardio equipment, lap swim, open swim, steam rooms. Does not include classes or continuous pool.

	In District 10 punches	Out of District 10 punches	In District 20 punches	Out of District 20 punches
Youth 2-12	\$22.50	\$36.00	\$42.50	\$68.00
Teen 13-18	\$27.00	\$40.50	\$51.00	\$76.50
Adult	\$31.50	\$45.00	\$59.50	\$85.00
Senior 60+	\$22.50	\$36.00	\$42.50	\$68.00

PRIVATE Personal Training

Per Visit	\$40.00
10 Punch Card	\$360.00

SEMI-PRIVATE Personal Training *price per person*

Per Visit	\$30.00
10 Punch Card	\$270.00

Fitness Classes

Per Visit	\$6.50
8 Punch Card	\$46.80
16 Punch Card	\$88.40

**All punch cards expire 1 year from the date of purchase.
No refunds or credits will be given for unused or lost punches.**

*Paper punch cards are the patron's responsibility to keep track of.
Lost cards will not be reimbursed. Losing a card will forfeit all remaining punches.*

SilverSneakers & Optum members **ONLY** \$3 per fitness class

FOR OFFICE USE ONLY

Punch Card Type _____

Total Payment Due \$ _____ Punch card# _____

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/ 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/ward or I may sustain as a result of said participation. 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 these programs/activities against the Bennett Parks and Recreation District including its officials, agents, volunteers and employees. I do hereby fully release and forever discharge the Bennett Parks and Recreation 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 these programs or activities. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

► **All Corporate Memberships are subject to “Membership requirements” and approval.**

PARTICIPATION WILL BE DENIED: If the Signature and date are not completed below.

X _____
Signature

Today’s Date

Photograph Release Authorization

From time to time, photos will be taken of children, staff, parents, and center activities. Bennett Park and Rec center requests permission to use these photos for our Webpage, Web feeds, scrapbooks, center related video and slide presentations, marketing/promotional purposes, etc. Please complete the form below to let us know if you authorize the release of you/your child’s picture for these purposes.

Adult Photo/Video Authorization

_____ I authorize the use of **MY photo**/video to be used by Bennett Park and Recreation District.

_____ I do **NOT** authorize the use of **MY photo**/video to be used by Bennett Park and Recreation District.

Name of Minor Child: _____

Signature: _____ Date: _____

Child’s Photo/Video Authorization (If applicable)

_____ I authorize the use of **MY CHILD’S** photography/video to be used by Bennett Park and Recreation District.

_____ I do **NOT** authorize the use of **MY CHILD’S** photography/video to be used by Bennett Park and Recreation District.

Name of Minor Child: _____

Signature: _____ Date: _____