

Ravenswood City Pool Pass Application

Type of Pool Pass: Individual or Family
(Immediate family only ex. Mom, Dad, Children)

Pricing: Individual (5-17 or 65+) \$80, (18-64) \$90
Family of 4 \$150
Additional member \$20

Name: _____ **Phone#:** _____

Address:

Street/P.O. Box _____

City _____

State _____

Zip Code _____

Members on Pass:

1.) _____ **Age** _____

2.) _____ **Age** _____

3.) _____ **Age** _____

4.) _____ **Age** _____

5.) _____ **Age** _____

6.) _____ **Age** _____

7.) _____ **Age** _____

Emergency Contact: _____ **Phone#** _____

Relationship: _____

Total Due:\$ _____ **Amount Paid:\$** _____ **Check#:** _____

Please make checks payable to City of Ravenswood.

Note: A \$25 service fee will be charged for any insufficient funds.

Pass# _____

RAVENSWOOD CITY POOL

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 and associated with the use of the Ravenswood City Pool facility 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 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 children and I agree that I am physically fit and/or adequately skilled for aquatic activities. **I additionally agree to supervise any children ages 12 and under at all times.** I further agree to waive and relinquish all claims I, or minor child/ward may have as a result of the use of the Ravenswood City Pool facility and programs against the City of Ravenswood, including its officials, agents, volunteers and management company. I do hereby fully release and forever discharge the City of Ravenswood and Professional Pool Management LLC 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 Ravenswood City Pool facility and programs.

CLOSING POLICY

The City of Ravenswood has a right to close the pool in the event of severe weather with no refunds due to the patron. The facility will close at the discretion of the manager based on inclement weather, health and safety issues, mechanical failures or if the facility has less than 10 patrons. The pool deck will be cleared if thunder or lightning occurs. The pool may reopen 30 minutes past the last thunder or lightning. NO weapons, drugs, alcohol, or glass containers may be brought inside the facility. Street clothes are not allowed in the pool. This is a health code issue. SWIM SUITS ONLY. It is the patron's responsibility to become familiar with all pool rules.

I hereby understand and agree to the Ravenswood City Pool waiver and closing policies.

Print Parent/Guardian Names:

Parents/Guardian's Signature

Date:

____/____/____

____/____/____