Season Pool

Pass



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Butte House Road & Acacia Avenue

Sutter, California

|  |  |
| --- | --- |
| Individual Season Pass  Membership Non-Membership $90.00 for one person (1) $100.00 for one person (1) | -Admission for one- for the 2022 season  -Not valid for special events  -2 individual activity trial passes of your choice |
| Family Season Pass  Membership Non-Membership  $180.00 for family of four (4) $200.00 for family of four (4)  Additional members - $45.00 Additional members - $50.00 | -Admission for family of 4- for the 2022 season  -Not valid for special events  -2 individual activity trial passes of your choice |

# FAMILY NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name (s): | |  |  | Ages: | |
| 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| 4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| 6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |  | \_\_\_\_\_\_\_\_\_ | |
| Email: | | | | Cell Phone Number: | |
| Address: | | | | Phone Number: | |
| Emergency Contact: | | | | Phone Number: | |

\*\*Continued on Back\*\*

RELEASE AND WAIVER OF LIABILITY (This is a legal and binding contract.)

“I am aware that accidents can happen around and in a swimming pool, and I or (my child/children/dependents) am voluntarily participating in the activities with knowledge of the dangers involved and hereby accept any and all risks of injury. I have carefully read this release and waiver and fully understand its content. I also understand that if I or (my child/children/dependents) do not follow the rules of the Morehead Family Community Pool and do not act in accordance with the instructions of the manages or lifeguards that I and/or my child(ren) may be asked to leave the premises. I fully understand that the managers have the duty to close the pool early in the event of extreme weather, water quality problems and/or low attendance (less than 12 swimmers) as agents of the SYO board. I am aware that this is a release of liability, including asserted negligence and is a contract between our family (including our guests) and the Sutter Youth Organization and its board members. I am signing this of my own free will. I agree that in the case of an emergency, illness and/or injury that the supervisor on duty has my permission to authorize emergency treatment for my minor age children.

I hereby give my consent to Morehead Family Community pool to photograph, film, videotape and then use, reproduce and publish said images of me and/or my children.”

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Signature of Member Date

Date of purchase: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Receipt # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Membership # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Pool pass # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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