



Powered by the Des Plaines Park District

## FITNESS/AQUATICS MEMBERSHIP

515 E. Thacker Street  
Prairie Lakes Community & Fitness Center P: 847-391-5711  
Aquatic Center P: 847-390-4949

Date: \_\_\_\_\_

Household Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

**Resident**

(Verification required)

**Non-Resident**

**Senior/Student/Military**

(Verification required)

Choose A Membership						Pay Method	
<input type="checkbox"/>	Prairie Pass	<input type="checkbox"/>	Gym/Courts	<input type="checkbox"/>	SilverSneakers*	<input type="checkbox"/>	Annual
<input type="checkbox"/>	Fitness	<input type="checkbox"/>	10x Pickle Ball	<input type="checkbox"/>	Prime*	<input type="checkbox"/>	Monthly
<input type="checkbox"/>	Aquatics	<input type="checkbox"/>	10x Gym Pass	<input type="checkbox"/>	Renew Active*	<input type="checkbox"/>	EFT
<input type="checkbox"/>	Track	Membership Number: _____					

Personal Training Sessions: \_\_\_\_ (1, 3, 6, or 10 sessions)

Participant First Name	Last Name	M/F	Birth Date	Fee
				Total: \$

\*SilverSneakers, PRIME, and Renew Active members: Does not include the Aquatic Center

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Card Holder Name: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

**Fitness Center, Gym, and Walking Track:**  
**Waiver and Release**

Aerobic and other fitness activities such as passive/resistive weight training, use of the stair machines, jogging, free weights, and other training devices are intended to challenge and engage the physical, mental and emotional resources of the participant. Despite careful and proper preparation, instruction, medical advice, conditioning, and equipment, there is still a risk of serious injury. All hazards and dangers cannot be foreseen. Depending on the particular activity, certain risks, dangers, and injuries due to overexertion, improper technique, ignoring safety precautions, failing to follow instructions, slips and falls, unfamiliarity with the equipment and/or exercise, equipment failure, failure in supervision/instruction, premises defect, and other risks inherent to the particular activity exist. In this regard, it is impossible for the Des Plaines Park District to guarantee absolute safety. Dependent upon a person's physical condition, age, and/or skill level, aerobics and fitness activities can involve a substantial risk of the following types of injuries. This list is by no means complete, but includes some of the more common ones:

1. Heart Attack, stroke, and circulatory problems
2. Bone and joint injuries
3. Back and neck injuries
4. Shin splints
5. Muscle strain and other muscle injuries
6. Foot problems

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 use of the Park District's fitness center, gym, and/or walking track and programs against the Park District, including its officials, agents, volunteers, and employees.

**Aquatic Center:**  
**Waiver and Release**

The Des Plaines Park District is committed to providing safe aquatic facilities. The Park District continually strives to reduce such risks and insists that all participants follow safety rules and regulations that are designed to protect the participants' safety. However, participants and parents/guardians of minors engaged in aquatic activities must recognize that there is an inherent risk of injury.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the activities associated with this Pool Pass. 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/aquatic activity.

**Warning of Risk**

Swimming and other aquatic activities challenge and engage 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 spinal cord injury. Understandably, not all hazards can be foreseen. The very nature of swimming and aquatic activities is hazardous and risky, including but not limited to fatigue, overexertion, poor swimming skills, failing to avoid dangerous areas, failing to follow rules and regulations, failure of lifeguards to locate victims and/or delay in emergency response times, horseplay, diving or cannonballing into shallow water and striking the bottom or striking other swimmers, striking one's head on the bottom, slips and falls on the deck or within the locker facility, chemical exposure and all other circumstances inherent to aquatic activities. In this regard, it must be recognized that it is impossible for the Park District to guarantee absolute safety.

**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 all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participation in any and all activities connected with and associated with use of the Park District aquatic facilities 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 injury any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participation in any and all activities and programs connected with or associated with this Pool Pass. I further recognize and agree that lifeguards and the aquatic staff are not responsible for supervising my activities or the activities of my minor child/ward and I agree that I am solely responsible for supervising my minor children and/or assessing whether my children are physically fit and/or adequately skilled for aquatic activities. I additionally agree to supervise any children under age 10 at all times. I agree to the terms of the District Photo/Video Policy."

**"I further agree to waive and relinquish all claims I, or my minor child may have (or accrue to me or my child/ward) as a result of use of the Park District's aquatic facilities and programs against the Park District, including its officials, agents, volunteers, and employees."**

***Never leave any child with poor swimming skills, or younger than 10 years of age, unaccompanied by a parent or responsible person 18 years of age or older.***

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

Member's Name \_\_\_\_\_ Signature \_\_\_\_\_  
Please print If over 18

**Guardian's Signature for Participants under 18 years of age** \_\_\_\_\_