

Montrose Recreation District (MRD) Membership Agreement Please complete form in blue or black ink. Type or print your information clearly. Main Contact Information

Member Name:	Work Phone:		
Home Address:	City/State: Zip:		
Cell/Home Phone;	Email:		
Pass Information Type of Pass (circle one):			
	ıth Individual Senior Dual		
-	Silver Sneakers Prime Silver & Fit Silver & Fit Affinity Active & Fit		
Enrollment Date: Resident? (Y/N) Regular OR Corpo	rate Business Name (if Corp.): Total Cost:		
Membership Information			
List all members who will participate in the membership including the above named member. Birth dates are required for all participants. If you are signing up more than four participants on a Family Pass, an additional fee per person is required as stated in the MRD Activity Guide. If additional space is required, please turn page over and list members and member information on the back.			
# Name (Please Print) Birth Date	Male/Female Relationship to Member		
1			
2	·		
3			
4	·		
5			
6	contained herein, including the payment of applicable fees and amounts. All		
4) Any misuse of ID cards, including use by a non-member, will result in a 5) Requests for refunds of Membership will be considered only in case of of Corporate Members, ending employment with the employer who is a conformation of passes, Monthly electronic withdrawals may be elected the membership in full. Members may elect to pay their annual pass on a (ACH), using a checking or savings account, which is the preferred methor or a voided check. Alternatively, members may elect Electronic Funds Tautomatic payment will enable the cost of the annual membership to be did After that one year, the deductions will continue and the membership will any increases in fees. Members understand that fees are due and payab fees are not kept current. Any payment that does not process will result in fee. Patrons with three monthly billings in a calendar year in a calendar year longer be eligible for monthly billing. Program registration and pass purch beginning of the month around the 5th or 6th day. Accounts that remain unany changes to credit card, debit or banking information. Memberships we membership. Paper billing has ceased. 7) Those who sign an annual pass contract are required to have an active pay the Early Termination Fee, which is as follows: \$100 for family pass, waived if a medical issue does not allow participation (documented by a natransferred to another patron of the same age category. Notice of termina that cancellation would happen 30 days following the first date MRD is no be completed in person at the Community Recreation Center. 8) All Members enrolling under a Family or Dual Membership Plan must not include any four members living in the same household. Children only members are participated of family members, seniors or personal pass or participation.	ize the facility. Lost cards will be replaced at a charge of \$5 per card, per incider		
Member Signature:	Date:		
Thank You for being a part of the Montrose Recreation District familyl MRD Use Only			
Date: Payment Method: Amount: \$ Fitness ID# Renewal Date (SF Only) MRD Staff Signature:			

MONTROSE RECREATION DISTRICT RELEASE AND WAIVER OF LIABILITY

I recognize that the use of Montrose Recreation District ("MRD") recreational facilities, and all equipment and facilities owned, operated or maintained by MRD and the participation in any program or activity of MRD (collectively, the "Recreational Facilities and Activities"), have inherent risks of injury. For and in consideration of MRD permitting me to use the Recreational Facilities and/or participate in the Recreational Activities, I, for myself, and on behalf of my spouse, assignees, heirs, guardians, and legal representatives hereby voluntarily indemnify, release from liability, agree to defend and hold harmless MRD and its officers, board of directors, employees, agents, representatives, volunteers (paid and unpaid), and any sponsoring partners, organizations or groups affiliated therewith (collectively MRD) for any accident, injury, illness, death, loss, theft, damage to person or property, or other consequences suffered by me arising or resulting directly or indirectly from my use of the Recreation Facilities and/or participation in the Recreational Activities, including but not limited to claims arising from or related to MRD's negligence. In the event that I am injured, I agree to assume any financial obligation, either through my health insurance, or through some other means, for any medical costs that I incur. MRD assumes no responsibility for any medical expenses, injury, or damage suffered by me in connection with my use of the Recreation Facilities and/or participation in the Recreational Activities.

I understand and acknowledge activities that are scheduled away from district facilities may involve added risks due to environment, location, weather, altitude, and distance from emergency medical services, risks that are inherent in the particular activity. I understand that I am encouraged to seek the advice of my own health provider regarding my ability or fitness to participate in any activity at any location listed in the guide before registering.

IT IS MY INTENTION BY SIGNING BELOW TO EXPRESSLY ASSUME ALL RISK OF PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE UPON MYSELF, TO THE EXCLUSION OF MRD, AND TO EXEMPT AND RELIEVE MRD FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH:

By signing this agreement, I waive my right to bring any legal action now or at any time in the future to recover compensation or obtain any other remedy for any injury to myself or my property or for my death, however caused, arising out of my use of the Recreational Facilities and/or participation in the Recreational Activities. I further agree that I, my spouse, assignees, heirs, guardians, and legal representatives will not make any claim against, sue or attempt to attach the property of MRD for any loss or damage resulting from my use of the Recreational Facilities and/or participation in the Recreational Activities. I am aware of the potential dangers incidental to recreational sports activity that this is a release of liability, a waiver of my legal right to collect damages in the event of injury, death or property damage, and a contract between MRD and me, and I sign it of my own free will. I expressly agree that this release is intended to be as broad and inclusive as the State of Colorado will allow and that if any portion is held invalid, I agree that the balance shall, not withstanding, continue in full legal force and effect.

Patron Code of Conduct and Photography Waiver

To ensure the safe enjoyment of MRD services, all patrons must exercise respect and exhibit appropriate behavior while utilizing MRD facilities and programs. Those not following this code may be asked to leave and/or forfeit their recreation pass. I also consent to MRD's use of photos of participants for promotional purposes. This includes photos of me and any participant for which I am a guardian.

MRD Staff Signature:

By signing, I agree to the Waiver of Liability and each section stated above.

Print Name of Participant	Date	
Signature of Participant or Parent/Guardian (If under the age of 18)		
Print Name of Participant		
Signature of Participant or Parent/Guardian (If under the age of 18)		
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Print Name of Participant		
Signature of Participant or Parent/Guardian (If under the age of 18)		
Print Name of Participant		
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Signature of Participant or Parent/Guardian (If under the age of 18)		
Signature of Participant of Parenti Guardian (11 miller the age of 10)		
Print Name of Participant		
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Signature of Participant or Parent/Guardian (If under the age of 18)		
Print Name of Participant		
Print Name of Participant		
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Signature of Participant or Parent/Guardian (If under the age of 18)		
MRD Use Only		
Date: Payment Method: Amount: \$	Fitness ID# Ren	newal Date (SF Only)_