

Bay Oaks Recreational Campus Member Registration Form

PLEASE PRINT and FILL OUT COMPLETELY

Full Name _____

Date of Birth _____ Email _____

Address _____

City _____ State _____ Zip _____

Home or Cell Phone _____

Individual/Family Memberships FREE for Island Residents.
(Up to 4 Family Members included, Must live in same household)

Individual Non-Resident Membership: \$15 for 1 week/ \$20 for 1 month/ \$30 for 6 Months/ \$45 for 1 Year
Family Non-Resident Membership: \$30 for 1 week/ \$40 for 1 month / \$55 for 6 Months / \$85 for 1 Year

Family Member Name	Date of Birth	Phone Number

Membership Type: (Check all that apply)

- Resident
 Individual
 Week
 6 Months
 Pool *See Prices Below
 Non-Resident
 Family
 Month
 1 Year

Pool Memberships:

Individual Island Residents: \$15/week \$40/Month \$60/Year
 Individual Non-Residents: \$20/Week \$55/Month \$75/Year

 Family Island Residents: \$25/Week \$75/Month \$125/Year
 Family Non-Residents: \$40/Week \$85/Month \$150/Year

Please Call **239-765-4222** to set up and pay for Memberships.
Payments can be made by Credit Card over the phone. Or Cash in person must be exact change.



Participant Waiver and General Release Form

Town of Fort Myers Beach, Florida



Waiver and release of all claims and assumption of risk for the Town of Fort Myers Beach, Florida. Please read this form carefully and be aware that in participating in Town of Fort Myers Beach (hereafter "Town") activities/programs, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you and/or your minor child might sustain as a result of participating in any and all activities connected with and associated with Town of Fort Myers Beach programs/activities (including transportation services/vehicles operation, when provided).

I recognize and acknowledge that there may be certain risks involved in participating in Town programs/activities, and I voluntarily agree to assume the full risk of any injuries, damages or loss that my minor child or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child may have (or accrue to me or my child) against the Town as a result of participating in such program/activity, including but not limited to claims against Town officials, officers, employees, agents, independent contractors associated with such programs/activities in any capacity, and/or volunteers (hereinafter collectively referred to as "parties"). I do hereby fully release and forever discharge the parties from any and all claims for injuries, damages or loss (including but not limited to attorney's fees and/or appellate attorney's fees associated therewith, whether or not suit is filed) that my minor child or I may have or which may accrue to me or my minor child and arising out of, connected with, or in any way associated with these programs/ activities or any of them. I indemnify and hold the Town, any of its employees and/or agents and/or any parties referenced above, from any and, all claims from my use of town property or participating in any town programs/activities. I further indemnify and hold harmless the Town, its employees and/or agents and/or any parties referenced above from all costs, expenses and liabilities resulting from any claim brought as a result of my or my child's use of Town property and/or participation in Town programs/activities to the extent of the town's liability under general law. I will comply with all requirements imposed by any federal, state, county or Town emergency declaration. Failure to do so will result in immediate revocation of this Agreement. I am familiar with federal, state, county and local laws, orders, directives, and guidelines relating to COVID-19 (including the Center of Disease Control's prevention guidance), and will comply with all such orders, directives and guidelines while on Town property and covenant not enter onto Town property if I am experiencing any symptoms of COVID-19, or have a confirmed or suspected case of COVID-19, or have come in contact in the last fourteen (14) days with a person who has been confirmed or suspected of having COVID-19. Notwithstanding the risks associated with participating in events held on Town facilities, I accept and assume all risks and liability of personal injury, illness, disability, death, or property damage related to COVID-19, arising from being on the premises or engaging in activity on the premises, whether caused by the negligence of the Town or otherwise. I acknowledge that the Town requires all participants to wear a life jacket or personal flotation device ("PFD") at all times when on the water. I understand that if I do not follow the Towns requirement of wearing my PFD, I face having my participation privileges revoked, and may be barred from activities. I understand that photographs, videos or other recording of my and /or child's face, likeness, and/or voice may occur during Town programs/activities, by signing below, I hereby agree that such face, likeness and/or voice may be published by the Town in brochures, newsletters, or other advertising for the Town.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, my facsimile signature shall substitute for, and have the same legal effect as, an original form signature.

PARTICIPANT SIGNATURE

WITNESS SIGNATURE

PARTICIPANT NAME/DATE

WITNESS NAME/DATE

IF APPLICABLE: NAME OF MINOR CHILD(REN)

PARENT/GUARDIAN SIGNATURE

WITNESS SIGNATURE

PARENT/GUARDIAN NAME/DATE

WITNESS NAME/DATE