

# The Timbers Pool Pass Application

\*The Timbers Pool Pass allows access to The Timbers Pool and locker rooms **ONLY**, and only during open swim times from May 23, 2020 - September 7, 2020\*

|                   | Resident | Non-Resident |
|-------------------|----------|--------------|
| Adult             | \$90.00  | \$130.00     |
| Youth/Senior      | \$75.00  | \$105.00     |
| Family of 5       | \$165.00 | \$235.00     |
| Additional Family | \$10.00  | \$10.00      |

***This pass does not include any membership benefits. Fees cannot be prorated.***

**Pool Pass Types (all passes require payment up front, no monthly or partial payments):**

**Adult:** 18 and Up

**Youth:** 17 and Under

**Senior:** 60+ years of age

**Family:** 5 people, up to 2 adults and dependents under the age of 24 living in the same residence

**Resident:** Living in City of Eureka limits. Current utility bill and photo ID are required to prove residency.

**Primary Member:**

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

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_ Gender M/F

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Secondary Member (if applicable):**

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

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

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_ Gender M/F

**Additional Family Members:**

|                          | First Name | Last Name | Date of Birth | Age | M/F |
|--------------------------|------------|-----------|---------------|-----|-----|
| Child                    |            |           |               |     |     |
| Child                    |            |           |               |     |     |
| Child                    |            |           |               |     |     |
| Child (add'l fees apply) |            |           |               |     |     |
| Child (add'l fees apply) |            |           |               |     |     |

I certify all family members meet the requirements for a family membership and that all members are living at the same residence and all children are 24 years old or younger \_\_\_\_\_

(initials)

(OVER)

|                        |                                      |                               |                           |        |    |
|------------------------|--------------------------------------|-------------------------------|---------------------------|--------|----|
| <b>OFFICE USE ONLY</b> | Staff Initials: _____                | Date: _____                   | Membership Type (circle): | Res    | NR |
| Membership Rate: _____ | Type of Payment: _____               | Adult                         | Youth/Senior              | Family |    |
| Photo ID: _____        | Current Utility Bill/Pay Stub: _____ | Residency Verification: _____ |                           |        |    |

**By initialing this agreement, I acknowledge and agree to the following terms:**

- Pool Pass:** The Pool Pass entitles you and/or family to the following: access to the swimming pool and locker rooms during open swim hours only **starting May 23 and ending September 7, 2020**, and access to Aqua Fun classes, including lap swim, river walk and super splashers. This pass does not grant you access to the facility at any time other time besides open swim hours. Pass cards must be presented at the Front Desk to gain entry into the facility. Replacement cards are \$5.00 each. This pass does not include any membership benefits including discounted rates.
- All pass purchases are final, no refunds will be issued. Rates cannot be prorated.
- Financial Policy:** By signing this pool pass application you agree to pay the dues and fees for the pass and/or services provided by The Timbers of Eureka. These fees are not refundable. A \$25.00 administrative fee will be due for any returned checks, insufficient funds, closed accounts, frozen or declined credit or any other circumstances.
- Physical and Medical Conditions:** For medical or health concerns, please consult with your physician before taking part in any physical activities, programs or events.
- Personal Property:** The City of Eureka is not responsible for lost, stolen or damaged property while on City premises. If you or anyone listed on your pass or your guests damage the facility you are liable for the cost of repairs/replacement. Cell phone and/or any other photographic devices are prohibited in the locker rooms and restrooms. Lockers are available and locks are highly recommended. Locks are available for purchase at the front desk. Locks remaining on lockers after business hours will be cut off at the expense of the patron.
- Conduct:** The Timbers of Eureka will not tolerate and does not permit any inappropriate conduct. Such conduct includes, but is not limited to, abusive and offensive language, profanity of any kind and all other conduct that is considered inappropriate or unsafe by staff. If rules and policies are violated The City of Eureka reserves the right to remove offenders from the building and/or terminate membership. Members, participants and visitors must abide by the rules and regulations of the Timbers of Eureka and the City of Eureka. No food or beverages may be brought into the facility, with the exception of water bottles subject to staff inspection. Glass bottles and containers are prohibited.
- Youth:** Children 12 years and younger require supervision at all times while utilizing the Timbers of Eureka Pool. Supervision may be by an adult, or each youth, 13 and older, may supervise only one guest 12 and younger. See staff at the front desk for more information.
- By purchasing a pool pass at The Timbers of Eureka, each participant realizes the inherent risks involved in the program and understands the nature of these risks. The City of Eureka does not provide coverage for any damages or injuries caused by participation in these programs. The City of Eureka provides no medical insurance. Accordingly, I hereby release the City of Eureka, together with its directors, officers, employees, volunteers and agents from all liability, claims, demands, losses or damages arising from participation in the Timbers of Eureka activities, using equipment or while on City premises; and I further agree that if, despite this release and waiver of liability agreement I, my family, or anyone on behalf of myself, makes a claim released in this agreement, my family will indemnify and hold harmless each entity and person released herein from any and all litigation expenses, attorney fees, loss, liability, damage, or cost they may incur as the result of such claim. Please sign below in compliance with this policy. My signature on this form further gives my permission to the City of Eureka to take photographs/video of me and my family, if applicable, at this event and to use these images for future promotions and/or in the organization's publications and web media. I agree to comply with the rules and regulations for the Timbers of Eureka.

Primary Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Adult Signature: \_\_\_\_\_ Date: \_\_\_\_\_