

Pass Registration Form

Water Park, Wood St. Fitness and Group Fitness Passes



Please fill out the registration form completely for all family members. Please return completed form along with proper fee to: LBorshell@bvilleparks.org or Bensenville Park District, 1000 W. Wood St., Bensenville Illinois 60106, (630) 766-7015. All registrants must have Household Information on file with Bensenville Park District prior to registration.

Family Last Name _____

Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

Email* _____

PARTICIPANT	BIRTH DATE	M/F	PASS TYPE	FEE

TOTAL \$ _____

 Bensenville Park District complies with the ADA. Please list any reasonable assistance that you may require. If you have questions or concerns regarding inclusion in our recreation programs, please call Phyllis Schmidt at 630-766-7015.

Assistance request: _____

Note: If check is returned to the park district stamped nonsufficient funds, full payment as well as a \$25 fee will be required via cash or credit card before participation in Bensenville Park District programs can continue.

* By providing your e-mail address you will receive valuable information about events, programs and services offered by Bensenville Park District. We respect your privacy, allowing you to opt out of receiving e-mails at any time. We do not lend or sell your personal information to any outside parties.

"As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, including loss of life, damage or loss which I may sustain as a result of participating in any and all activities connected with or associated with such programs." I further agree to waive and relinquish all claims, fully release and discharge and agree to indemnify and hold harmless and defend the park district and its officers, agents, servants and employees from any and all claims resulting from injuries including: loss of life, damages and losses sustained by me and arising out of, connected with or in any way associated with the activities of the program. By signing this document, you signify that you have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax your on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Participant Signature (if over 18) _____ Date _____

Parent or Guardian Signature (required if under 18) _____ Date _____

Cash \$ _____ Check # _____ Staff Initials _____

Credit Card V M D: _____ Exp. Date: _____ CVV#: _____

Authorized Cardholder Signature: _____ Zip Code: _____

Member and Pass Punch Rules

THE MEMBER CAN CANCEL FITNESS AND AQUATIC MEMBERSHIPS WITHIN 3 BUSINESS DAYS AFTER THE CONTRACT IS SIGNED BY THE MEMBER, and all monies paid pursuant to said contract shall be refunded to the member in full. After this time period, the member may not cancel membership unless they have a doctor's note or are relocating for work.

Initial _____

Punch Passes expire one year from date of purchase and are non-refundable.

Initial _____

If the member, because of death or disability, is unable to use or receive services contracted for, the member, or his estate as the case may be, may elect to receive the remaining portion of fees due for services not rendered without notice or within the guidelines stated above. The Bensenville Park District shall in such event have the right to require and verify reasonable evidence of such death or disability.

Initial _____

Memberships or punch passes may be transferred to a qualified (spouse or children) family members living in the same household. Facility age requirements must be met and the account of the transferring member must be in good standing before the transfer occurs. The new member must fulfill the duration of the agreement.

Initial _____

Memberships or punch passes may be suspended due to travel or medical issues. Documentation is required to suspend the account. If documentation is not available or if there is a specific request outside of travel or medical, the request will be evaluated on an individual basis. Suspensions may occur for up to one month. After the suspension has been completed, the number of months equal to the duration of the suspension will be added on to the end date of the membership. Suspensions may only occur one time per the course of the active membership.

Initial _____

All dues and fees are subject to change.

Initial _____