Village of Hawthorn Woods Aquatic Center Season Pass Registration Form - Summer 2022

94 Midlothian Road, Hawthorn Woods, IL 60047 • www.vhw.org • Fax: (847) 438-1459

Please Print / Form must be filled out completely

Family Last Name:	Hm #:			
Street			City	Zip
mail Address:		Cell #:		
Emergency Contact:				
Emergency Contact:Name			Relationship	Phone #
		-	D FOR RESIDENT RATE	=
Fami			ehold to be eligible for a older must have a pass	
			ough June 30, 2022	
	A	0111 1, 2022 (III	ough June 30, 2022	
Description of Pass	Resident	Non-Res	Amount Due	
Individual / Nanny	\$78	\$103		
Family - 2 person	\$157	\$206		
Family - 3 person	\$235	\$309		
Family - 4 person	\$276	\$361		
Family - 5 person	\$317	\$412		
Additional Person	\$41	\$52		
Senior 65+	\$76	\$100		
	Total Am	ount Due:		
Name of Pass Holder (s)	B-Day	M/F	Payment Information:	
			Amount:	□ Cash □ Check#
			Charge: □ Visa □	□ MC □ Disc □ AmEx
			Account#	
			Exp. Date:	
			Security Code:	
			Cardholder Name:	
			Signature:	
PROC	OF OF RESIDEN	CY IS REQUIRE	D FOR RESIDENT RATE	
			ehold to be eligible for a	- ·
Passes require	d for anyone age	es 4 and up (ag	e as of opening day: Ma	y 28, 2022)

I, the undersigned, understand that passes must be used by individuals to whom issued and that misuse will be cause for suspension of pass. The undersigned, understands that children ten years and under must be accompanied by an individual sixteen years or older. The undersigned and all above members agree to abide by all rules and restrictions established by the Village of Hawthorn Woods. I understand there is \$5 replacement fee for lost or stolen pool passes. Refunds allowed only for medical disability or relocation reasons (verification required). Memberships are not transferable. I have received, read and fully understand the attached important information, warning of risk, assumption of risk and waiver and release of all claims. If registering via fax, your facsimile signature shall substitute for and have the same legal effect as an original form signature.

Signature of Parent / Guardian	Date:		
Make Checks Payable: Village of Hawthorn Woods - Drop off, Mail or Fax			
Village Hall, 2 Lagoon Drive, Hawthorn Wo	oods, IL 60047 www.vhw.org F: (847) 438-1459		



Village of Hawthorn Woods Aquatic Center 2022 IMPORTANT INFORMATION

The Village of Hawthorn Woods is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Village of Hawthorn Woods continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities. You are solely responsible for determining if you or your minor child/ward are physically fit and adequately skilled for the activities contemplated by this agreement. 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 activity.

WARNING OF RISK

Swimming is a sport which challenges and engages 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 cervical spine injury. Understandably, not all hazards and dangers can be foreseen. The very nature of swimming is hazardous and risky, including but not limited to fatigue and overexertion, poor swimming skills, failing to avoid dangerous areas, horseplay, diving or cannon-balling into shallow water and striking the bottom or side of the pool, poor supervision or instruction, lack of conditioning, becoming disoriented, striking other swimmers, defective or inadequate equipment, striking one's head on the bottom when using a diving block, slipping or falling on the deck or within the locker facility, chemical exposure and all other circumstances inherent to the sport of swimming. In this regard it must be recognized that it is impossible for the Village of Hawthorn Woods to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/ activity (including transportation services, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program, and I voluntarily agree to assume the full risk of any injuries, including death, damages or loss, regardless of severity that my minor child/ward or I may sustain as result of participating in any and all activities connected with or associated with this program/activity. 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 participating in this program/activity against the Village of Hawthorn Woods, including its officers, officials, agents, volunteers and employees (hereinafter collectively referred as "the Village of Hawthorn Woods").

I do hereby fully release and forever discharge the Village of Hawthorn Woods from any and all claims for injures, including death, damages or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and rising out of, connected with, or in any way associated with the program/activity. I further agree to indemnify and hold harmless and defend the Village of Hawthorn Woods from any and all claims resulting from injuries, including death, damages and losses sustained by me or my minor child/ward and arising out of, connected with, or in any way associated with the program/activity.

Please keep for your records