

2016 Bowman Parks and Recreation Swimming Pool Membership & Swimming Lessons Form

Visit our website at bowmanparksandrec.org

Notifications on facebook: Bowman Parks and Recreation

Complete the registration section below and mail to: Bowman Parks and Recreation, Box 112, Bowman, ND 58623

If you wish to speak to someone personally about the activity or want/need more information, contact:
 Chanell Walby or Heidi Fischer at 701-523-3896 or email bowmanparksandrec@gmail.com

MEMBERSHIP CATEGORY	Cost Per Unit	Start Date	Expiration Date
Season Pass – Youth (6 – 18)	\$ 75.00	_____	_____
Season Pass – Adult (19 - 60)	\$ 85.00	_____	_____
Season Pass – Senior (60+)	\$ 80.00	_____	_____
Season Pass – Family (Immediate Family)	\$ 150.00	_____	_____
Monthly Pass – Water Aerobics / Lap Swim	\$ 25.00 (Seniors Free)	_____	_____

No Refunds on passes once season has begun

SWIMMING LESSONS	Cost Per Unit	Reg. Cutoff	6/20-7/1 Session 1	7/11-7/22 Session 2	8/1-8/12 Session 3
Group Lessons:					
Parent/Tot Course (6 month +) – 30 min	\$15.00	7 days Prior		M/W 5:30pm	
Pre-School – Ages 4 – 5 - 30 min	\$25.00	7 days Prior		M-Th 11:15 or 4:15	
Levels 1 – 6 – Minimum Age 6					
Level 1 - 30 min	\$25.00	7 days Prior		M-Th 10:00	
Level 2 - 45 min	\$35.00	7 days Prior		M-Th 10:30 or 4:15	
Level 3 - 45 min	\$35.00	7 days Prior		M-Th 11:15 or 4:15	
Level 4 - 45 min	\$35.00	7 days Prior		M-Th 11:15 or 4:15	
Level 5 - 45 min	\$35.00	7 days Prior		M-Th 10:00	
Level 6 - 45 min	\$35.00	7 days Prior		M-Th 10:00	

Family Discount – Per family per session \$95.00
Parents allowed on deck first lesson day only – Rain Day Makeup will be on Fridays' during session

Private Session - 30 min Session \$25.00 Dates/Time Requested: _____
No guarantee to receive requested dates and instructor Instructor Requested: _____

Would you consider entering participant to group lesson if an instructor is not available? YES NO

MEMBERSHIP/SWIMMING LESSON INFORMATION

Primary Member's Name _____ Date of Birth _____

Secondary Member's Name _____

Current Mailing Address _____ City _____ Zip _____

Phone (home) _____ Cell Primary _____ Cell Secondary _____ Okay to Text? _____

E-Mail _____

	Level	Session	Time
Child's name _____ Date of Birth _____			
Child's name _____ Date of Birth _____			
Child's name _____ Date of Birth _____			
Child's name _____ Date of Birth _____			
Child's name _____ Date of Birth _____			

~ DO NOT WRITE BELOW – Bowman Parks and Recreation USE ONLY ~

Date Paid: _____ Fee Paid: \$ _____ Cash _____ Check #: _____ Staff Initial: _____

MUST SIGN THE BACK - OVER

Release of liability hold harmless and indemnification

I desire to engage voluntarily in recreational activities and/or exercise programs at the Bowman Parks and Recreation Rouzie Recreation Center for enjoyment and/ or to attempt to improve my physical fitness. I understand that some of the activities are designed to place a gradually increasing workload on the cardio respiratory system and to thereby attempt to improve its function. The reaction of the cardio respiratory system to such activities cannot be predicted with complete accuracy. There is a risk of certain changes that might occur during or following some exercises. These changes might include abnormalities of blood pressure or heart rate.

I understand that the purpose of an exercise program is to develop and maintain cardio respiratory fitness, body composition, flexibility and muscular strength and endurance. I may request assistance for a specific exercise plan, based on my needs and interests and my doctor’s recommendations.

I understand that I am responsible for monitoring my own condition throughout any recreational activities and/or exercise programs and should any unusual symptoms occur, I will cease my participation and inform the program instructor or manager on duty of the symptoms.

In signing this consent form, I affirm that I have read this form in its entirety and that I understand the nature of my recreational activity and/or exercise program. I also affirm that my questions regarding the recreational activity and/or exercise program have been answered to my satisfaction.

In the event that a medical clearance must be obtained prior to my participation in any exercise program, I agree to consult my physician and obtain written permission from my physician prior to the commencement of any exercise program.

Waiver and Release: In consideration of Bowman Parks and Recreation granting me and my minor children the permission to engage in and assume the risk of recreational activities and/or exercise programs with the Bowman Parks and Recreation Department, I/ we agree to assume the risk of such activity and/or exercise and further agree to release, hold harmless and indemnify the Bowman Parks and Recreation Board, its employees, agents and independent contractors conducting the recreational activity and/or exercise program from any and all claims, suits, losses or related causes of action for damages, including but not limited to, such claims that may result from my/our injury or death, accidental or otherwise, during or arising in any way from recreational activity and/or exercise program, loss of property, personal injury to me/us or the act or failure to act by the Bowman Parks and Recreation Board or its employees, agents or independent contractors. The undersigned further assumes the risk of all dangerous conditions in and about the Bowman Parks and Recreation Department property both real and personal and waive any and all specific notice of the existence of such dangerous conditions, if any. Registrants and participants of programs and special events permit the taking of photos and videos of themselves and their children during the Department activities for publication in the program brochure, website, and additional uses as the Department deems necessary. Furthermore, the release bars claims by the undersigned’s children, heirs, assigns, executors and administrators.

Signature of participant or legal guardian/parent (if participant is under 18 years old) Date

Signature of participant or legal guardian/parent (if participant is under 18 years old) Date