



Last Name: _____ HH#: _____ Healthways ID#: _____

Staff Initials: _____

Date: ____/____/____

2016 Pass Registration Form**1. Payer Information:**

PRIMARY GUARDIAN'S FIRST NAME _____ LAST NAME _____ BIRTHDATE _____

ADDRESS _____ or _____ HH # _____ CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

E-MAIL ADDRESS _____ EMERGENCY CONTACT NAME/PHONE _____

____ Modifications (check if needed). See "Statement of Accessibility" on reverse side of this form.

____ I have read and fully understand the policies and the Carmel Clay Parks & Recreation Waiver and Release on page 2 of this form. I understand my signature, or my primary guardian's signature if I am under 18, is required to use the Carmel Clay Parks & Recreation facility.

PRIMARY GUARDIAN'S SIGNATURE _____ DATE _____

2. Participant Information (Proof of residency may be required for all adult household members):

PASSHOLDER (FIRST & LAST NAMES)	BIRTHDATE	GENDER	PASS TYPE	MONTHLY FEE
	/ /			
	/ /			
	/ /			
	/ /			
	/ /			
	/ /			

***First month payment must be included with this registration form.** Total Amount Due Today: _____

First month payment made today by:

Cash Check VISA/MasterCard/American Express/Discover Gift Card \$ _____

3. Payment Information:

PAYMENT	
1.) One Time Payment (Annual Passes Only): Amount Paid Today \$ _____ First month payment made today by: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Visa/MasterCard/AmEx/Discover <input type="checkbox"/> Gift Card	2.) Automatic Monthly Payment required for future payments: Payment amount authorized for processing each month \$ _____ <input type="checkbox"/> Visa/MasterCard/AmEx/Discover <input type="checkbox"/> Checking/Savings Debit (Must attach voided check) <i>*Complete appropriate boxes below.</i>

Initial _____ By completing a box below, I authorize Carmel Clay Parks & Recreation to process payment (s) indicated for my Pass(es) to the Monon Community Center. I will provide the Carmel Clay Parks & Recreation Department a minimum cancellation notice of 7 days prior to the next payment date.

Credit Card Information *Card must be swiped at time of purchase or may be phoned in for payment.

				-XXXX-XXXX-				
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ACCOUNT NUMBER- please fill in first 4, last 4

EXP. DATE (mm/yy)

CARDHOLDER NAME (Please Print)

AUTHORIZED SIGNATURE

Checking/Savings Debit Information *Voided check or account verification from financial institution must be attached.

FINANCIAL INSTITUTION

ROUTING NUMBER

ACCOUNT NUMBER

NAME ON ACCOUNT (Please Print)

AUTHORIZED SIGNATURE

Pass Registration Form Page 2

Carmel Clay Parks & Recreation Waiver and Release

On my behalf and on behalf of my heirs and assigns, I HEREBY RELEASE, WAIVE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO HOLD HARMLESS THE CARMEL/CLAY BOARD OF PARKS AND RECREATION, CARMEL CLAY PARKS & RECREATION, CITY OF CARMEL, CLAY TOWNSHIP, ITS AND THEIR OFFICIALS, OFFICERS, PASSHOLDERS, INDEPENDENT CONTRACTORS, EMPLOYEES AND VOLUNTEERS (the "Releasees"), from any and all claims or liability for personal injury or property damage my child and/or I may cause or suffer directly or indirectly arising out of or relating in any respect to participation in a program, event, service or facility provided by or made available through Carmel Clay Parks & Recreation. This waiver and release of all claims, demands, actions, and liability shall include, without limitations, any injury, damage or loss to person or property which may be (a) caused by any act, or failure to act, by Releasees even if said injury, damage or loss results from the negligence of any or all of the above-identified Releasees or (b) sustained by me during and/or at the Carmel Clay Parks & Recreation program, event, service or facility in which I and/or my child participate(s).

Photo and Video Policy

Photos and video are periodically taken of participants in a class, during an event, or within Carmel Clay parks and facilities. Photos and video footage are for the use of Carmel Clay Parks & Recreation and may be used in the Department's publications, website, and social media. All photos are the property of the Carmel/Clay Board of Parks and Recreation. For more information, please contact the Marketing Director at 317.573.4020 or labas@carmelclayparks.com. By signing this registration form, I understand and acknowledge my photo and the other participants listed may be utilized in marketing materials for the Department.

Carmel Clay Parks & Recreation reserves the right, at its sole discretion, to withhold and/or withdraw permission to photograph on its premises or to reproduce photographs of objects in its collections. Please follow our photo shoot process and submit the Photo Shoot Application available at <http://carmelclayparks.com/policies/>.

Statement of Accessibility

CCPR believes every individual has the right to participate in activities and programs that supports their physical, mental, social and emotional wellness, and therefore contribute to enhancing their overall quality of life. This is achieved by identifying and removing barriers to serve individual and community needs, in addition to providing accessible quality programs and services to all. Please indicate on the registration form if any modifications are needed for successful inclusion into a program or service in accordance with the Americans with Disabilities Act (ADA).

Code of Conduct

All users of facilities are expected to exhibit appropriate behavior at all times will participating, spectating or attending any program, event, service and/or facility provided by Carmel Clay Parks & Recreation. This includes in programs, events, services or facilities that may or may not require an admission fee, spectating at athletic events, concerts or attending special events. The following guidelines are designed to provide safe and enjoyable facilities for all users. Users shall:

- Show respect to all users and facility staff/supervisors.
- Take direction from facility staff/supervisors.
- Refrain from using abusive or foul language.
- Refrain from causing bodily harm to self, other users or facility staff/supervisors.
- Refrain from damaging equipment, supplies and facilities.

A written or verbal warning shall be given to users/spectators if the Code of Conduct rules have been violated. If there is a second occurrence, users/spectators shall be withdrawn from the facility without a refund.

Monon Community Center Pass

Membership provides complete access during regular hours of operation to the Waterpark (seasonal), Indoor Aquatics, Fitness Center, Track, Gymnasium (during open gym times as specified on gym calendar), KidZone (childcare), and Group Fitness Classes (Excluding Wellness). Passes do not include participation in swim lessons and structured recreation or sports programs.

KidZone

KidZone (childcare) is available to children 6 months to 12 years for up to a maximum of two hours per visit. Parent(s) or guardian(s) must remain in the MCC during the time of visit. Reservations are recommended, drop-ins will be accommodated on a first-come, first-served basis as long as the staff-to-child ratios remain within the 1:12 guidelines.

Aquatic Seasonal Pass

The aquatic seasonal pass is available for seasonal purchase (Saturday of Memorial weekend through Labor Day).

Age Definition and Fitness Center Requirements

A Youth is defined as an individual, 3 to 15-years-old. Children age 2 and under are admitted free when accompanied by an adult. Youth must be at least 11 years to use the fitness center. Youth ages 11-15 must complete orientation before using the fitness center. Youth ages 11-13 must be accompanied and directly supervised by an adult member while using the Fitness Center. An Adult is defined as an individual, 16 to 64-years-old. A Senior is defined as an individual, 65-years-old and older.

Declined Auto Payments/Returned Checks

Declined monthly payments and/or returned checks will result in cancellation of pass privileges and participation in department programs and services until delinquent fees are paid in full. Monthly passes must have current billing information on file. It is the responsibility of consumer to keep the Monon Community Center updated of any changes to their billing method so that funds may be withdrawn monthly.

Pass Refund Policy

The issuance of refund checks is subject to the Indiana State Board of Account's claim procedures and may take 3-4 weeks to process. Purchases made by use of credit/debit card may be refunded directly to the card. **PLEASE SEE BELOW FOR SPECIFIC PASS REFUND ELIGIBILITY.**

Pass Cancellation Policies

Monthly Pass

Automatic payment setup is required from a credit/debit card, or checking or savings account for a Monthly Pass. Monthly Passes shall remain in full effect until cancelled by the account holder or by Carmel Clay Parks & Recreation. Cancellation requests must be received in writing or online at least seven (7) business days before the next automatic payment date to stop the payment from being processed. All associated passes shall be cancelled effective the date the written cancellation notice is received. Prorated refunds shall not be issued for Monthly Passes.

Annual Pass

Annual passes shall remain in full effect for one year from the date of purchase. Early cancellation requests must be received in writing. All associated passes shall be cancelled effective the date the written cancellation is received. A prorated refund shall be issued based on the number of full months remaining on the pass based on the date the cancellation request is received.

Seasonal Pass

Seasonal passes shall remain in full effect from the Saturday before Memorial Day through Labor Day. Prorated rates are not available based on the date of purchase. Early cancellation requests must be received in writing. All associated passes shall be cancelled effective the date the written cancellation is received. A prorated refund shall be issued based on the number of full months remaining on the pass based on the date the cancellation request is received.

Pass Transfer Policy

Requests to transfer to a different pass type must be received in writing. Pass transfer requests require a minimum of seven business days' notice prior to the next billing date, which allows time for CCPR to update the auto payment processing setup.