

**Unlimited Ice
Summer 2018
Monthly Pass**



Name of Skater: _____

Monthly Unlimited Freestyle Ice Pass \$200

Unlimited is for the calendar month not from the date of purchase: June 1, July 1, and August 1

Monthly Unlimited FS Ice Pass is will not be prorated, transferable or credited for unused ice

If there are multiple children in a family there is a \$50 discount for other children

Skaters can skate as often as they wish

There is a limit of 25 skaters per session

Skaters who have Unlimited Freestyle Ice Pass have priority over walk-on skaters

Skaters must sign in at the front desk for each FS session that will be skated

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/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. 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 Glenview Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred as "Glenview Park District").

I do hereby fully release and forever discharge the Glenview Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity.

I understand that photos and videos are periodically taken of people participating in Glenview Park District programs and activities and I agree that any photograph or videotape taken by the park district of me or my minor child/ward while participating in a park district program or activity may be used by the park district for promotional purposes including its electronic media, videotapes, brochures, flyers and other publications without additional prior notice, permission or compensation to the participant.

I have read and fully understand the above 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.

PARTICIPATION WILL BE DENIED if signature of adult participant or parent/guardian and date are not on this waiver.

Fill in information for head of household – please print

Adult Registrant or Parent/Guardian Name _____
Address _____ City _____ Zip _____
Home Phone (_____) _____ Business Phone (_____) _____ E-mail _____

Name as it appears on Credit Card **PLEASE PRINT**

VISA ___ M/C ___ DISCOVER ___ CASH ___ CHECK ___

CARD # _____ EXP. DATE _____

I hereby acknowledge I have read and agree to the conditions stated above.

Signature of Credit Card Holder

Date