



MIDDLEBURG HEIGHTS
COMMUNITY CENTER

Part Time Employee in Middleburg Hts Membership Form

Must provide proof of P/T employment

Please choose One:

		<i>Yearly Rate</i>	<i>6 Month Rate</i>
Adult	(ages 19-59)	\$345	\$190
Senior	(ages 60 and over)	\$190	\$105
*Family (up to 5 people)		\$515	\$285
**Additional Family Member		\$40	\$25

**Covers up to 5 individuals (2 adults and up to 3 dependent children ages 23 or younger) all must reside at the same address.*

***Refers to Family Memberships*

Name _____ Membership # _____

Address _____ City _____ Zip _____

Preferred Phone () _____ Male _____ Female _____

Other Phone () _____ Age _____ Birthdate _____

E-Mail _____

Spouse's Name (only if becoming a member) _____

Age _____ Birthdate _____ Male _____ Female _____

Children's Names:

First Name	M	Last Name	Member #	Birthdate	Age	Sex

Please make checks payable to the *Middleburg Hts. Recreation Dept.*

Office Use Only:

Amt. Due _____ Amt. Paid \$ _____ Receipt # _____ Staff Initial _____
 Check _____ Cash _____ Credit Card _____ Date _____

RELEASE AND WAIVER OF LIABILITY
AND INDEMNITY AGREEMENT

IN CONSIDERATION of being permitted to enter the Middleburg Heights Community Center for any purpose, including, but not limited to observation, use of facilities or equipment, or participation in any way, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees, and represents that he or she has, or immediately entering, will inspect such premises and facilities. It is further warranted and such entry into the Middleburg Heights Community Center for observation, participation or use of any facilities or equipment constitute and acknowledgement that such premises and all facilities and equipment thereon have been inspected and that the undersigned finds and accepts same as being safe and reasonably suited for the purposes of such observation or use.

IF FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE MIDDLEBURG HEIGHTS COMMUNITY CENTER FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION, USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY WAY, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGE, AND COVENANTS NOT TO SUE the City of Middleburg Heights, its directors, officers, employees and agents (hereinafter referred to as "releasee(s)") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasee(s) and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the Middleburg Heights Community Center premises or in any way observing or using any facilities or equipment of the Middleburg Heights Community Center whether caused by the negligence of the releasee(s) or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to the negligence of releasee(s) or otherwise while in, about or upon premises of the Middleburg Heights Community Center and/or while using the premises or any facilities or equipment hereon.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER, AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Ohio and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE; I ALSO AGREE TO ABIDE BY ALL CENTR POLICIES AND RULES:

_____ Signature	_____ Date
_____ Spouse/ Other Adult Signature	_____ 18 Year Old Signature
_____ Signature of Parent/Guardian for applicants under age 18	_____ 18 Year Old Signature

ALL applicants over age 18 must sign; one parent/guardian signature applies to all applicants under age 18