



# 2023-24 Dodds Tennis Center Membership Application

Dodds Tennis Center membership is good from September 11, 2023 to May 15, 2024. Membership is renewable.

## INFORMATION (please print)

Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

## ADDITIONAL USERS (family membership only)

Name	Birthdate (MM/DD/YYYY)	Gender
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____

## PERMANENT COURT TIME

You must be a Dodds Tennis Center member to purchase Permanent Court Time. If you are part of a Permanent Court Time group, who is your captain? \_\_\_\_\_

## PAYMENT (circle membership desired)

	<u>Resident</u>	<u>Non-Resident</u>
Individual (ages 18-54)	\$70	\$105
Family (2-4 members)	\$100	\$150
Each additional family member	\$12 x ____ = \$ ____	\$18 x ____ = \$ ____
Senior (ages 55+)	\$42	\$63
Full-time Students	\$42	\$63

Total Due: \$ \_\_\_\_\_

Cash (do not mail cash)     Check (payable to Champaign Park District)

Credit Card:     Visa             MasterCard

Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Holder Signature: \_\_\_\_\_

**OVER →**  
(Waiver on back must be signed.)

## **IMPORTANT INFORMATION**

Champaign Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. Champaign Park District 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 Park District programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or 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 illness, injury or impairment, to consult a physician before undertaking any physical activity.

## **WARNING OF RISK**

Recreational activities/programs are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slipping, falling, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating, and all other circumstances inherent to indoor and outdoor recreational activities/programs exist. In this regard, it must be recognized that it is impossible 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 the identified programs/activities, 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 said programs/activities (including transportation services/vehicle operation, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities, 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 these programs/activities against Champaign Park District, Champaign and Urbana Special Recreation, and Urbana Park District, including their respective officials, officers, employees, and volunteers.

I do hereby fully release and forever discharge Champaign Park District, Champaign and Urbana Special Recreation, and Urbana 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 these programs/activities.

*I have read and understand the above important information, warning of risk, and waiver and release of all claims and assumption of risk. I understand the membership fee is non-refundable. I also understand that all parties listed on this application are responsible for following all policies and procedures outlined by the Champaign Park District. I understand that any breach of these policies and procedures by myself or anyone listed on this application will result in forfeiture of the membership rights.*

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Name (PLEASE PRINT)

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Signature of Adult Applicant or Parent/Guardian (if under 18 years old)

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Date