



## Municipality of South Bruce Tennis Court/Pickleball Registration Form 2024

First & Last Name: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_ Secondary Phone Number: \_\_\_\_\_

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

List Family Members (if applicable)

First Name ( & last name if different from above last name)	if Junior (18 or under)	Emails
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	

Seasonal User Fees     Pickleball     Tennis     Waiver Returned

Membership Types	Fee	Total
<input type="checkbox"/> Single Adult Membership	\$ 75.00	\$
<input type="checkbox"/> Family Membership (2 adults, unlimited children, must reside at the same residence)	\$125.00	\$
<input type="checkbox"/> Junior (18 and under)	N/A	N/A
<input type="checkbox"/> Key Deposit (Returnable at seasons end)	\$25	\$25

**Season Information** \$ \_\_\_\_\_

Courts Open: Saturday, May 18<sup>th</sup> (weather dependent)    Courts Close: As weather permits (TBD)

### How to Register

Drop off the Registration Form, Waiver, and payment at the Municipal Administration Office or the Mildmay Carrick Swimming Pool (MCSP) to receive a Tennis Court Key. **Please note that drop off at the MCSP is only available during the months of July and August.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only			
Date Received	Staff Initials	Amount Paid	Method
Date Payment Entered	Staff Initials	Receipt Number	
Key #			
Date Key Pick Up	Key Return Date		

#### Collection of Personal Information

The personal information collected on this form is collected under the authority of the Municipal Act and will be used for registration purposes and to monitor and evaluate recreation programs for South Bruce. Questions about this collection should be addressed to the Recreation and Facilities Manager at 519-392-6623.

**SOUTH BRUCE TENNIS & PICKELBALL COURT WAIVER OF LIABILITY AND RELEASE**

The tennis/pickleball facilities located at Carnegie Park, Mildmay, Ontario (the "Facilities") are owned by the Municipality of South Bruce. I understand that the Municipality of South Bruce is responsible for the maintenance and safe operation of the Facilities. I acknowledge that it is my responsibility to contribute to the safety of the premises and will check the courts for hazards prior to play. I will remove the hazardous material to a waste receptacle and notify the Municipality of South Bruce if I observe a more serious hazard. I further understand that the use of the Facilities and participation in the programs and events will be at my own risk and that I will not hold the Municipality of South Bruce liable for a personal injury or harm associated with or arising from my use of the Facilities and/or my participation in the activities. I acknowledge that tennis/pickleball is a vigorous and competitive sport and that I am physically and mentally capable of playing tennis/pickleball and participating in events staged by the Municipality of South Bruce and that I choose to participate in the activities of the Municipality of South Bruce at my own risk. I further acknowledge that the Municipality of South Bruce may use my image(s) for promoting the courts and its activities, which may include advertising, promotion and marketing. IN CONSIDERATION of the Municipality of South Bruce accepting me as a user of the facilities :

- 1. I HEREBY AGREE TO RELEASE, DISCHARGE, AND NOT TO SUE , the Municipality of South Bruce (collectively referred to as the "Releasees") from any and all liability to myself, each member or my family and each of my invited guests, for injury to my person or property, including injury resulting in death.
- 2. I HEREBY ASSUME FULL RESPONSIBILITY for any risk or occurrence of bodily injury or death to myself, my family and my guests, or for property damage while in attendance at the Facilities, playing tennis pickleball at the Facility.
- 3. I HEREBY AGREE TO INDEMNIFY AND SAVE HARMLESS the Releasees from any loss, liability, damage or costs that they may incur as a result of any injury to myself, a member of my family or to any guest of mine injured while in attendance at the Facilities or elsewhere.
- 4. I HEREBY ACKNOWLEDGE AND AGREE to abide by the Facility Rules and Guidelines posted on the Municipal website and in the facility.
- 5. I HEREBY ACKNOWLEDGE that I am 18 years of age or older (and if not, that the permission and signature of my parent or legal guardian is required and presented below). I have read this WAIVER OF LIABILITY AND RELEASE, understand that I have given up substantial rights by checking the agree box, and have done so freely and voluntarily without any inducement, assurance or guarantee being made to me, and that it is a complete and unconditional release of all liability to the greatest extent allowed by law.  
By checking this box, you agree to the above

Members Names:

_____	_____
_____	_____

Junior Name(s):

_____	_____
_____	_____

Member Signature \_\_\_\_\_

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

Office Use Only	
Received By:	Date: