



Date: ____/____/____
Card No.: _____

**PARKS & RECREATION
FITNESS & AQUATICS PASS FORM**

Donal M. Synder Sr. Community Center - Biloxi Natatorium

Name: _____ D.O.B.: ____/____/____
First MI Last

Address: _____ City: _____

State: _____ Zip: _____ Email: _____ Phone: (____) _____ - _____

Emergency Contact: _____ Phone: (____) _____ - _____
First Last

PROOF OF RESIDENCY IS REQUIRED; CURRENT DRIVERS LICENSE, VOTERS REGISTRATION CARD, OR UTILITY BILL WILL BE ACCEPTED. PERSONAL CHECKS WILL NOT BE ACCEPTED.

Monthly **FITNESS** (includes DSCC & Nat pool use)

Resident	\$25.00
Non-Resident	\$40.00

AQUATICS (includes Nat & DSCC pool use)

15 Visit Pass	\$30.00
(Expires in 90 days)	

Annual -Individual

Resident	\$175.00
Non-Resident	\$250.00
Senior Resident	\$60.00
Senior Non-Resident	\$110.00

Annual -Individual

Resident	\$125.00
Non-Resident	\$175.00
Senior Resident	\$60.00
Senior Non-Resident	\$90.00

Annual - Family (2-6 persons per household)

Family Resident	\$250.00
Family Non-Resident	\$300.00
Senior Fam. Resident	\$125.00
Sen. Fam. Non Resident	\$175.00

Annual - Family (2-6 persons per household)

Family Resident	\$175.00
Family Non-Resident	\$200.00
Senior Fam. Resident	\$100.00
Sen. Fam. Non Resident	\$150.00

For fitness, ages 13-17 must be accompanied by a parent or guardian. No one under the age of 13 allowed on second floor.

For aquatics, ages 9 & younger must be accompanied by an adult. (Ages 18 & older considered an adult)

Passes cannot be shared.

Method of payment: cash, check, or money order.
Credit cards accepted for minimal fee

Senior citizen prices available for age 55 and older.

OFFICE USE ONLY

15 Visit Pass: _____ Monthly: _____ Annually: _____ Amount: \$ _____ Receipt No.: _____

Method of Payment

Cash: _____ Check No.: _____ Credit Card: _____ Money Order No.: _____
Date: ____/____/____ Received by: _____



RELEASE AND INDEMNITY

WHEREFORE, for and in consideration of the use of certain weight room facilities and exercise equipment and/or Aquatic facilities owned by the City of Biloxi, Mississippi, and located in the City of Biloxi, facility, I _____ do hereby release, acquit and forever discharge the City of Biloxi, Mississippi, and all of its respective agents, servants, employees, elected and non-elected officials, successors, predecessors, insurers, attorneys, and any and all other legal entities and persons, of and from any and all claims, demands, actions, damages, liability, or legal recourse of any type, and expenses (including attorney's fees) in connection with or arising from or out of my use of said weight room and/or WHEREFORE, PREMISES CONSIDERED: The undersigned further agrees that the he/she shall indemnify and hold harmless the City of Biloxi against and from all claims, demands, and actions, rights of action, liabilities, losses, judgments, costs, expenses, and attorney fees which shall or may arise by virtue of anything done or omitted to be done by us, including through or by its agents, employees, or other representatives, arising out of, claimed on account of, or in any manner predicated upon the use of the above identified room and equipment. The undersigned further agrees to protect and save and keep the City harmless and indemnify the City against and from any and all claims, demands, actions, liabilities, judgments, losses, costs, damages or expenses (including attorney's fees) arising out of, claimed on account of, or in any manner predicted upon any accident or other occurrence arising from the use of the above identified room and equipment causing injury to person(s) (including death) or property to whomsoever or whatsoever in law and equity.

This the _____ day of _____, _____.

Signature: _____

Signature of Parent or Guardian: _____

(Parent's signature is required for those under the age of 18; guardian's signature is required for any minor for whom a guardian is appointed.)

PHOTOGRAPHIC LIKENESS CONSENT

Please Print Name: _____

By signing below I give the City of Biloxi permission to use my and/or my child's photographic likeness in promotional publications, educational publications, display and in other media.

I grant permission to the City of Biloxi to use, reproduce, distribute and/or publicize my and/or my child's photographic likeness taken by the City of Biloxi. Publication, use and distribution of my and/or my child's photographic likeness may be by any means and without limit. Publication or use may occur in any media, including newspaper; magazines, television; brochures; pamphlets; instructional material; books; internet, web pages, and educational material.

I acknowledge that I understand that the City of Biloxi intends to use my and/or my child's photographic likeness for educations and promotional purposes.

This agreement is binding on successors, assigns, and/or heirs.

Signature: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

(Parent's signature is required for those under the age of 18; guardian's signature is required for any minor for whom a guardian is appointed.)