



**CITY OF CLERMONT
CHAMPIONS SPLASH PARK**
100 Third Street, Clermont, FL 34711

RESIDENT PASS

Directions:

1. Complete and clearly print all information on this page.
2. List all family members for whom you are purchasing a pass.
3. Read and sign the Waiver on the back of this page.
4. You may pay by cash, credit card, or write a check payable to "City of Clermont".
5. Please bring valid proof of residency (Driver's License) along with this form and payment to one of the following locations:

Clermont City Center
620 W. Montrose Street, Clermont, FL 34711

P L E A S E P R I N T

Family Last Name: _____ Registration Date: _____

Home Address: _____

City/State: CLERMONT, FL Zip: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____ Email: _____

Cost of City of Clermont Resident Splash Park Pass is \$15.00 (tax incld.) per season.

First & Last Name	Birth Date (mm-dd-yyyy)	Fee (\$15 per person)	PASS # (office use only)
Total Fees Due			

Resident Pass Rules

- Splash Park passes are only available to City of Clermont residents and their dependents.
- Passes are not transferable.
- Each individual must present their pass to be admitted into the Splash Park. Those without a pass will be required to pay the daily entrance fee to enter the Splash Park.
- The City of Clermont reserves the right to modify, cancel, or discontinue the resident pass program, Splash Park hours, and length of season at any time.
- No refunds.
- Splash Park may close unexpectedly due to weather, capacity, maintenance, etc.
- Users must follow all posted Splash Park rules.
- Lost, stolen, or misplaced passes can be replaced for a \$5.00 fee.
- Passes are only valid for current season and do not carry over to next season.

City of Clermont Parks & Recreation Department
620 W. Montrose Street, Clermont FL 34711
352-708-5975
www.ClermontFL.gov

City of Clermont Waiver and Release for Recreational Programs

IMPORTANT INFORMATION

The City of Clermont is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participation in high regard. The City of Clermont continually strives to reduce such risks and insist that all participants and parents/guardians of minors registering for the listed 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 is physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disable in any way or recently suffered an 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 exists. In this regard, it must be recognized that it is impossible for the City of Clermont 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 program/activities, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims my minor child/ward or I may have (or accrue to my child/ward or me) as a result of participating in these programs/activities against the City of Clermont, including its officials, agents, volunteers, and employees.

I do hereby fully release and forever discharge the City of Clermont 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.

Participant Name PRINT (if older than 18)
Or
Parent Name PRINT

Participant Signature (if older than 18)
or
Parent Signature

Date