

Joining Date:

# **Continuous On-Going Pass Holder Agreement**

Primary Pass Holder Name: _				Date:			
Parent/Guardian Name:							
Home Address:							
Mailing Address (if different than home address):							
City:	State:	Zip:	E-mail:				
Home Phone:		Work I	Phone:				
Emergency Contact Name:			_ Emergency	/ Contact #:			
Pass Plan: Marshall:	Firstenburg:	All Acces	ss Pass				
Type of Pass: Adult	Family	Senior 65+	Youth	(Youth Pass incl: FCC/MCC)			
*Members must be living in the same household to qualify for a Family: Limit 6 (2/adults/4children or 1 adult/5 children) *Children							
must be under the age of 19 and living in the household.							
**For All-Access memberships and Firstenburg memberships a climbing wall waiver is required. Request a waiver form from the front							
desk team at Firstenburg Community Center.							

Passes: The pass will be <u>effective indefinitely</u> so long as payments are kept current and subject to terms and conditions:

This pass is non-transferable, and the primary pass holder is liable for the financial obligation of this Agreement regardless of whether I/We utilize the facility. Pass holders will not be credited due to lack of use of the facility or unavailability of the facility due to any routine or scheduled maintenance of up to two weeks in duration, or if maximum occupancy of the facility has been reached.

#### **Monthly payments:**

- 1. Pass holders agree to pay the City of Vancouver a monthly fee for the duration of this agreement.
- 2.Payments will be processed on the second day of the month until written notice of cancellation is received.
- 3.Automatic Credit Card Payment: Payment automatically charged to your credit card and/or debit card. Changes to credit or debit card information must be done, in person, at the customer service desk. Failed payment on the 2<sup>nd</sup> day of the month will result in cancellation of the membership until payment is made, in full, at the customer service desk.
- 4. Pass holders will be notified of any change in pass fees at least 30 days prior to the change taking effect.
- 5. Cancellation Policy: Cancellation forms must be completed and submitted in person or online by the 24<sup>th</sup> of the month to be effective the next billing cycle. Failure to submit by the 24<sup>th</sup> of the month will result in the member being responsible for the next month's dues. Cancellation of the membership would be delayed by one month. To cancel online go to: <a href="https://www.cityofvancouver.us/ParksRecCulture">www.cityofvancouver.us/ParksRecCulture</a>, select Firstenburg or Marshall Center. Click onto "Hours & Fees". Select, "Cancel Your Ongoing Pass Online". Fill out the form and click, "Submit".
- 6. No refund or credit will be issued between the date of the request and the effective date.
- 7. Passes may be suspended or canceled for violation of the posted rules and regulation for the Vancouver Parks, Recreation and Cultural Services.

**Miscellaneous Fees:** A \$5.00 fee will be charged for a replacement pass card, per person.

## A Change in Status must be submitted in person by the 24th of the month.

All changes commence on the day of the next billing cycle. NO REFUND OR CREDIT will be issued between the date of the request and the effective date.

### RELEASE – HOLD HARMLESS AGREEMENT

To be signed by the primary pass holder for all members listed below including the additional adult and youth participants on the contract.

In consideration of the City of Vancouver is allowing for my participation, I agree as follows:

- 1. I am of lawful age and legally competent to sign this Agreement.
- 2. I understand that the terms of this Agreement are contractual and not mere recitals.
- 3. Am of lawful age to sign for all additional members of the household on this contract.

#### For any **YOUTH PASS HOLDERS** (under the age of 18), I also agree that I:

- 4. Am of lawful age and competent as the parent or legal guardian of the youth to sign this Agreement.
- 5. Am voluntarily allowing my child(ren) to participate in this program.
- 6. Recognize that there are certain risks and dangers inherent in participation in this type of activity.
- 7. Acknowledge that participation in this activity is desirable, but not essential in nature.
- 8. Understand the City of Vancouver cannot and do not guarantee or ensure the safety of my child(ren).

I understand the foregoing and therefore; on behalf of myself/ spouse/ partner and as parent/guardian of the child(ren) indicated below, hereby agree to release, save and hold harmless the City of Vancouver and their respective officials, administrators, employees, volunteers, and agents from any and all liability and claims for any damage or injury brought by me, my family, estate, heirs, or assigns arising out of my or my child(ren)'s enrollment or participation in this program except as may arise solely from the gross negligence of the City of Vancouver, or from the acts of third parties. I understand that by signing this Agreement, I am not waiving any rights or claims my child(ren) may have for damage or injury resulting from his/her/their participation in this program.

I have carefully read the Pass Holder Agreement and Release Hold Harmless Agreement. My signature signifies that I/We voluntarily agree to all the terms and conditions on page 1 and 2.

Pass Holder Name/s (Printed) Including Primary Pass Holder	Signature Required if 18 or older  Parent/ guardian sign for children under 18	Birth Date	Age	Gender	Need a Fitness Trainer to contact you?

### **Payment Authorization:**

I/we hereby authorize the City of Vancouver, to initiate monthly credit card payments on the second day of the month. I/we understand and accept that in the event that payment(s) do not fully process, my/our membership will be revoked and access to the facilities will be denied. This includes credit card accounts that have been closed due to fraud, insufficient funds, changes in credit card number, expiration date or CVV number, etc.

Last four digits of credit card:	Expiration date on card:
Name as it appears on card (please print):	
Authorized Signature of card holder:	

In case of an erroneous debit, provided I/we supply notice to DEPOSITORY within 60 days of receiving my/our account statement, the DEPOSITORY must investigate and resolve the error within 45 days, but if it has not done so within 10 days, my/our account will be credited for the amount in question while it finishes the investigation.