



# Aquatics Pass Registration Form

Save time and purchase online at  
**WWW.SANRAMONRECGUIDE.COM**  
*To be used for Lap and Recreation Swim Pass only*

*For Office Use Only*

Main Contact Barcode: \_\_\_\_\_

Main Contact Name: \_\_\_\_\_

First \_\_\_\_\_

Last \_\_\_\_\_

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

(Parent/Guardian) First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Birth Date: \_\_\_\_\_

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

**Type of Pass:** *Please check desired passes*

	Fees	Savings
<input type="radio"/> Daily Swim	\$5.00	None
<input type="radio"/> 10 Visit Swim Pass	\$48.00	4%
<input type="radio"/> 20 Visit Swim Pass	\$90.00	10%
<input type="radio"/> 40 Visit Swim Pass	\$170.00	15%
<input type="radio"/> 60 Visit Swim Pass	\$240.00	20%

**Conditions of Use:**

• **Swim Pass:**

I understand that the Swim Pass can be used at the San Ramon Olympic Pool. \_\_\_\_\_ (initials) **I understand that the Swim Pass is non-refundable.** \_\_\_\_\_ (initials) I understand that a re-print for a lost or misplaced card will incur a \$3.00 fee. \_\_\_\_\_ (initials) **I understand this pass will expire 2 years from the date it's activated.** \_\_\_\_\_ (initials)

I have read and understand the refund policy and the following Waiver of Liability: This release is intended to discharge in advance the City of San Ramon, including all of its respective agents, officials, volunteers, sponsors and employees, from and against any and all liability arising out of or connected in any way with me or my child/legal guardian's participation in the above activities, even though the liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above. I understand the inherent risks involved in participating in recreational activities including but not limited to terrain, facilities, temperature, weather, condition of participant, equipment, and lack of hydration. Furthermore, I hereby agree that I, my heirs and assignees will not make claim against, sue, attach the property of, or prosecute the City of San Ramon and any sponsor, or any affiliate organization for injury or damage resulting from active or passive negligence, carelessness or other acts, howsoever caused by any employee, agent or contractor of the City of San Ramon or its affiliates, as a result of my participation in the above activities. In the event that the above named individual is a minor, I certify that I am the legal parent or guardian of the above participant, that he/she is in good physical condition and I give my permission for him/her to participate in the above activities. I hereby acknowledge that the above named minor has voluntarily applied to participate in the above activities. I agree to accept and abide by all rules and regulations of the event/program and the city of San Ramon. The City of San Ramon and its staff are authorized to use their discretion to secure the necessary emergency services for the participant at my expense. This includes, but is not limited to emergency treatment, paramedic services and ambulance services. I hereby grant permission to the City to release my email address to contract instructors, coaches, or other City program providers for City business purposes. I hereby grant permission to the City to take me or my child/legal guardian's photo while participating in activities or programs to use for publicity. A signature is required by each adult participant registering on this form. One parent/legal guardian may sign for all minors. I understand that my signature is a legal and binding signature and will be considered original if received by electronic means.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Payment Form:**      CASH      CHECK      VISA      M/C      AMX      GO Points

Charge to my:      MasterCard       VISA       American Express       Go Points  \_\_\_\_\_

Print name as it appears on card \_\_\_\_\_

Expiration Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_

Card No. \_\_\_\_\_ Amount \$ \_\_\_\_\_