



# Large Group Beach Passes

## Wilmette Park District - Gillson Beach

This form is to be used by those wishing to purchase 20 or more daily beach passes.

Contact Name \_\_\_\_\_

Organization Name (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Date Requested \_\_\_\_\_

Time of Arrival \_\_\_\_\_

Total number of participants, age 2 and older \_\_\_\_\_ X \$8/person = \$ \_\_\_\_\_

Please read this form carefully and be aware that in signing up and participating in activities at the Wilmette Park District's Centennial Family Aquatic Center and/or Gillson and Langdon Park Swimming Beaches 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 the Centennial Family Aquatic Center and/or Gillson and Langdon Park Swimming Beaches.

I recognize and acknowledge that there are certain risks of physical injury to participants who use aquatic facilities, and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity that my minor child/ward or I may sustain as a result of participating in any and all activities connected with or associated with the Centennial Family Aquatic Center and/or Gillson and Langdon Park Swimming Beaches. I further agree to waive and relinquish all claims I or my minor child/ward may have as a result of participating in aquatic activities against the Wilmette Park District, including its officials, agents, volunteers and employees.

I do hereby fully release and forever discharge the Wilmette Park District 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 the Centennial Family Aquatic Center and/or Gillson and Langdon Park Swimming Beaches. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

### **Initial below to acknowledge each statement**

\_\_\_\_\_ Refunds will not be granted for weather or beach closures, a reschedule may occur but must be requested no less than 24 hours prior to arrival time.

\_\_\_\_\_ Wristbands must be picked up by the contact person at the arrival time at the beach house.

\_\_\_\_\_ I agree to the waiver and release of all claims and assumption of risk.

Credit Card Number \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Expiration \_\_\_\_/\_\_\_\_ CVC \_\_\_\_\_

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