## **CEDAR VALLEY SPORTSPLEX**



300 Jefferson Street • Waterloo, IA 50701 • 319.291.0165 • CVSportsPlex.org

## BYRNES AQUATIC CENTER – MEMBERSHIP APPLICATION

801 Campbell Ave | Waterloo, IA 50701 | 319-291-4453

Membership purchase will be available at the Cedar Valley SportsPlex beginning May 1<sup>st</sup>. Memberships are valid at Byrnes Pool only. Child, Youth/Adult, and Senior memberships provide admission to open swim and lap swim as age appropriate. Lap Swim memberships may be used during lap swim times only. Memberships are non-refundable and non-transferable. Passes are valid for the 2025 summer season only.

MEMBERSHIP TYPE	RATE	RESTRICTIONS
Child	<b>\$25.00</b> (\$23.36 + \$1.64 TAX)	Ages 9 & under
Youth/Adult	<b>\$50.00</b> (\$46.73 + \$3.27 TAX)	Ages 10-61
Senior	<b>\$25.00</b> (\$23.36 + \$1.64 TAX)	Ages 62+
Lap Swim	<b>\$25.00</b> (\$23.36 + \$1.64 TAX)	Ages 16+

Primary: First	La	est	DOB
Preferred Phone #	E	mail	
Address		City	State Zip
Membership Type: ☐ Yo	uth/Adult 🗆 Senior 🗆 Lap Swim 🗀 Chi	ld (must be accompanied by an individu	ual age 16+ while at facility)
Additional Memberships or	n Account		Membership Type
1: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
2: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
3: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
4: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
5: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
6: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
7: First	Last	DOB	☐ Child ☐ Youth/Adult ☐ Senior
	on the account above have an emerg ame, relationship, phone number):		orimary, please provide additional information her
Key Card Members: E	xpiration Date nts who are Key Card holders ma		% off. Discount applied to regular rates only

on Youth/Adult & Child memberships only – no additional discounts. Discount does not apply to daily admissions. Key card must be presented at time of purchase. <u>Individual must be listed on the key card to receive discounted membership</u>. Contact Operation Threshold to apply: 1535 Lafayette St, Waterloo, 319-290-2065. **Byrnes Membership Requirements**: All members must have current photos uploaded or taken to be admitted into the facility. This can be done electronically on your Activity Regiscount, at the Cedar Valley SportsPley, or at Byrnes. Each member must scan their

can be done electronically on your Activity Reg account, at the Cedar Valley SportsPlex, or at Byrnes. Each member must scan their membership ID to gain admittance into Byrnes. Membership ID options include electronic QR code (Activity Reg account or saved photo), Cedar Valley SportsPlex membership card (barcode), or printed membership ID (QR code). The Cedar Valley SportsPlex will not supply Byrnes membership cards.

## **BYRNES FACILITY ACCESS REQUIREMENTS:**

- All members are required to check in at the front desk for each visit.
- Children 0-9 years of age MUST be accompanied by an individual 16 years or older while using the facility. Children will not be permitted into the facility without appropriate supervision.
- Youths 10 years of age and older are permitted to use the facility without supervision of an individual 16 years or older.

## CITY OF WATERLOO, BYRNES AQUATIC CENTER: WAIVER OF LIABILITY, ASSUMPTION OF RISK & INDEMNITY AGREEMENT

I am fully aware of dangers and risks involved in participating in every activity at the City of Waterloo Byrnes Aquatic Center facility (the "Byrnes Pool"), including but not limited to lap swimming, water walking (lap lanes or current channel), recreational swimming ("Open Swim"), group exercise, use of waterslide, use of diving board, basketball, interaction with spray features (seastar, sling soaker, water weaver, waterfall), climbing, jumping, engaging in diving activities outside of designated areas, running, walking and observation of activities (collectively, the Activities), and in using Byrnes Pool premises and equipment for these and other purposes. Those dangers and risks include, but are not limited to, such things as equipment malfunction or failure, inappropriate or unexpected actions of other participants, muscle or joint tears, sprains, strains, broken or fractured bones, concussion and other severe or fatal injuries related to the Activities. With knowledge of these dangers and risks, I make the promises and agreements stated below.

<u>Waiver:</u> In consideration of permission to use the property, facilities, equipment, staff and services of the Byrnes Pool, I hereby release, waive, discharge, and covenant not to sue the City of Waterloo, Iowa, their officials, directors, officers, employees, volunteers and agents, from any and all claims, demands, actions, costs, expenses, and liabilities of any type or nature whatsoever, including but not limited to reasonable attorney's fees and expenses, arising out of or in any way connected with the Activities or my use of the Byrnes Pool premises or equipment resulting in, but not limited to, physical or psychological injury, pain, suffering, illness, disfigurement, death, economic loss or property damage sustained by myself or others.

Assumption of Risks: The specific risks from the Activities vary from one activity to another, but the risks range from (1) minor injuries such as scratches, bruises and sprains, (2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks and concussions, and (3) catastrophic injuries including paralysis and death. Risks also include damage to or loss of personal property. With full knowledge of the risks that are inherent in the Activities and my use of the Byrnes Pool premises and equipment, I hereby state that my participation in the Activities is voluntary and that I knowingly assume all such risks.

<u>Indemnity:</u> I further agree to indemnify and hold harmless the City of Waterloo, Iowa, their officials, directors, officers, employees, volunteers and agents, from and against any and all claims, demands, actions, costs, expenses, and liabilities of any type or nature whatsoever, including but not limited to reasonable attorney's fees and expenses, arising out of or in any way connected with the Activities, my use of the Byrnes Pool premises or equipment, or otherwise.

Status to Participate: I certify that I am physically and mentally able to participate in any Activity in which I choose to participate. I understand that if I am uncertain about my ability to participate in any Activity, it is my responsibility to consult my personal physician before doing so. In the case of a medical emergency that occurs during my participation in an Activity, employees or agents of the City of Waterloo may take actions to obtain or administer whatever treatment regarding my health and safety is considered to be warranted under the circumstances, although they are not obligated to take any such action. Such actions taken do not create a special relationship between the City of Waterloo and me. I agree to be solely responsible for any costs related to treatment.

Scope: I understand and agree that the terms of this Agreement, including but not limited to the waivers, assumptions of risks and indemnities set forth above, are intended to be as broad and inclusive as permitted by Iowa law. If any portion of this Agreement is held invalid, I agree that the remaining provisions shall continue to be in full legal force and effect. I agree that this Agreement is and will be binding on me and my heirs, assigns and personal representatives.

<u>Photo Policy:</u> Byrnes Pool may video tape or take photographs of members participating in activities, classes, or programs. These photographs and/or video tapes are for use in future Byrnes Pool magazines, brochures, promotional literature, websites, or for use on cable television. If members would like to opt out of photographs or videos, they must do so in writing.

ACKNOWLEDGMENT OF UNDERSTANDING: I have read this Agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Agreement freely and voluntarily, and I intend by my signature to completely and unconditionally release all liability to the maximum extent allowed by law. If I am not yet 18 years old, my parent or guardian has read this Agreement and signed below on behalf of both of us.

Members are required to observe and comply with all rules and policies set forth by the facility and staff. By signing this application, I indicate that I have read all aspects of this document and fully agree to the terms and conditions.

Primary Signature:	Date:		
	Staff Initia	als:	