



Lake Preston School District



Auxiliary Gym & Weight Room Application and Agreement

I/We desire to utilize the LPHS Auxiliary Gym and Weight room and hereby provide the following information for our application:

Member(s) Information:

1. Name _____
Last First MI Date of Birth

2. Name _____
Last First MI Date of Birth

Address: _____ Phone: _____
Number & Street City State Zip

1. Mobile Phone: _____ Email Address: _____

2. Mobile Phone: _____ Email Address: _____

Occupation: _____ Employer: _____ Work Phone: _____

Business Address: _____ Phone: _____
Number & Street City State Zip

Family Members

3. Name _____ Age _____ Birth Date _____

4. Name _____ Age _____ Birth Date _____

5. Name _____ Age _____ Birth Date _____

6. Name _____ Age _____ Birth Date _____

Emergency Contact:

Name: _____ Relationship: _____

Daytime Phone: _____ Evening Phone: _____

Access Fee: To establish and qualify for membership, responsible party must:

1. Complete this form in its entirety.
2. Provide a government issued identification card of the applicant and responsible party.
3. Be 18 years of age or older, and have completed high school.
4. Pay a one-time, *non-refundable* deposit of \$ **25.00** per activated card.
5. Pay an annual fee of \$25.00 (**\$50.00 first payment, with non-refundable deposit**, \$25 annually after that.)
6. Make checks payable to Lake Preston School and give to the Superintendent of the Lake Preston School.

If the member receiving a card loses the card, please notify administration and it will be deactivated. If a card needs to be replaced, the member will then again apply for a new access card and provide a new deposit to the Lake Preston School Weight Room and Gym.

Annual Fee: To continue ongoing membership, member agrees to pay an annual fee \$ **25.00** per **activated card due annually on January 1st**. Failure to pay by January 1st will result in your card being deactivated until payment is made. This annual fee is not prorated, meaning that if you pay \$25 for the current year, regardless of when you applied. (ie. Feb, May, Sept, etc. would all pay \$25 for the remainder of the year.) For the annual fee, please make checks payable to Lake Preston School and give to Kristi Curd, Business Manager of the Lake Preston School.

Liability and Waiver of Liability: Each member of the Lake Preston School Weight Room and Gym shall be liable for any property damage and/or personal injury (caused by the Member, Member's Family, Guest or any other person) at the LPSWG (Lake Preston School Weight Room and Gym) or any activity or function operated, arranged or sponsored by the LPSWG. It shall be the obligation of the member to pay for any costs involved upon presentation of a statement thereof. Any and all use of the LPSWG facilities, or participation in, the LPSWG, activities operated, arranged or sponsored by the LPSWG either on or off of the LPSWG premises by the Member, Member's Family, or Guest(s) shall be AT SUCH PERSON'S OWN RISK, and the LPSWG shall not be liable for any injuries or damages to such person, property of such person, or be subject to any claim, demand, injury or damages. The Member individually, and on behalf of the Member's personal representative, heirs, administrators, assigns and successors does here by expressly forever release and discharge the LPSWG, its successors and assigns, as well as its officers, agents, and employees from all such claims, demands, actions, or causes of action. Cameras will be present and recording at all times in the gym and weight room.

Suspension/Termination of Membership by Administration: Administration has the right to suspend and/or terminate any membership for non-payment of fee, behavior, damage of property, coaches/teachers/administration discretion due to any reason deemed insufficient of expectations of LPSWG staff.

Agreement and Release of Liability: Lake Preston School Weight Room and Gym will provide access to building using a card system. I acknowledge the supervision is not always provided at the facility. I acknowledge that the use of the card access system by someone other than myself will result in loss of membership. **Initials.**
I further acknowledge that this access card and key gives me access to auxiliary gym and weight room only during non-school hours.

I certify that I have received a copy of the Rules and Bylaws and have read and understand them.

Signature of Member

Date

Witness