



Last Name

DuPage Swimming Center Open Lap Swim Agreement 2020

Adult Member's Name _____ **Email Address** _____
Address _____ City _____ Zip _____
Home Phone _____ Work Phone _____ Cell _____
Date of Birth (Adult who the Membership will be under): _____

Anyone under the age of 16 must be on either a couple or family membership with an adult.

Membership Type (Auto-charged on the 1st of the Month):

Single (1 individual – over the age of 16) – \$25 per month

Couple (2 individuals – one must be over the age of 16) – \$30 per month

Family (up to 2 children) – \$35 per month

Daily Pass – \$5 per person, per day

Discounts are available to families who are enrolled in lessons at the time of each monthly booking.

Discounted Membership Type (Auto-charged on the 1st of the Month):

Single (1 individual – over the age of 16) – \$20 per month

Couple (2 individuals – one must be over the age of 16) – \$25 per month

Family (up to 2 children) – \$30 per month

- **Payment must be made at the time of booking.**
- **The first month will be pro-rated based on the number of days remaining in the month.**
- **You will be auto-renewed and charged on the first of each month.**
- **To cancel your membership, you must email swim@smpools.com no later than the 27th of the month.**
- **All lap swim members must maintain a current credit/debit card on file.**
- **Alternate payment methods must be submitted on/before the 1st of the month.**

Credit Card Information

Update card on file using the information below:

Credit Card Number: _____ Exp. Date: _____

Cardholder's Signature: _____

Phone: (630) 692-1500 ext. 101 Fax: (630) 692-1528 Email: swim@smpools.com



DuPage Swimming Center Open Lap Swim Policies

_____ Lap Swimmers are not guaranteed their own lane. Private Lessons and lifeguard courses have priority.
Initial

_____ Cancellation of services should be submitted, in writing, no later than the 27th of the current month.
Initial

_____ Lap Swim will be automatically charged on the first of the month, if no cancellation notice is received by the 27th.
Initial

_____ Swimmers under the age of 16 must be accompanied by an adult (and must include an adult on their membership).
Initial

_____ No refunds given for purchased lap swim agreements.
Initial

_____ Children not potty-trained are required to wear a tight-fitting swim diaper, rubber pants, and swimsuit in the pool.
Initial

_____ Lap swimmers cannot enter the water prior to designated open lap swim start times.
Initial

_____ All monthly Lap Swimmers must maintain a valid credit/debit card on file.
Initial

- Shoulder length hair must be tied up or in a swim cap
- No street shoes are permitted on deck
- Proper swim attire must be worn in the pool (no cutoffs, shorts, or cloth diapers)
- You must be 16 years of age to have a Single Membership
- Persons having bandages, open sores, cuts, etc., are advised not to use the pool
- Other than plastic bottled water, no food or drinks are allowed in the pool area
- No running, rough play, or boisterous behavior is allowed in the pool area
- No diving allowed in the teaching pool or shallow end of the lap pool
- No diving allowed off of the blocks without signed waiver
- Hard plastic balls or toys are not permitted in the pool
- Lifeguards have the authority to enforce any rule not written to maintain a safe environment for all members and staff
- Family rates only apply to immediate family members (living in the same household)
- Adults have priority, in the lap pool, over those less than 16 years old
- Children younger than 16 years must pass a swim test in order to swim in the Lap pool, if they are unable to pass this test, they must swim in the wading pool until swim test is passed
- Failure to comply with facility rules shall result in immediate termination of membership without a refund

DuPage Swimming Center Waiver and Assumption of Risk:

It is expressly agreed that the use of the DuPage Swimming Center, Inc. shall be undertaken by a member at his or her own risk, and the DuPage Swimming Center, Inc. shall not be liable for any injuries or damage to any member or guest, or the property of any member or guest be subject to any claim, demand, injury or damages whatever, including without limitations, those damages resulting from acts of active or passive negligence on the part of the DuPage Swimming Center, Inc., its successors, assignees, as well as its officers and agents, for all such claims, demands, injuries, damages, actions or causes of action. It is especially agreed that the DuPage Swimming Center, Inc. shall not be responsible or liable for loss or damage to any other property of members or their guests, including their automobiles and contents. It is also agreed that any damages to the swimming center facilities or property, or to the property of any member by another member or his guest, is the sole responsibility of the offending member.

The DuPage Swimming Center, Inc. urges all members to obtain a physical examination prior to the use of the facilities. In recognition of the possible dangers connected with physical activity, member(s) hereby knowingly and voluntarily waive their right or cause of action of any kind whatsoever arising as a result of such activity from which any liability may or could accrue to the DuPage Swimming Center, Inc., its officers, agents, or employees.

I certify that I have read and agree to the policies of the DuPage Swimming Center, Inc.

(Customer Signature)

(Date)

LAST NAME



DuPage Swimming Center Patron COVID Waiver

DuPage Swimming Center is implementing as many precautions as possible to prevent the spread of Covid-19. Despite these precautions, DuPage Swimming Center in no way warrants or guarantees that DuPage Swimming Center's patrons and their families will not be exposed to or contract COVID-19 at DuPage Swimming Center. Thus, DuPage Swimming Center strongly discourages patrons who are at high risk or who have parents/guardians who are at high risk for severe illness from being at DuPage Swimming Center.

As part of your patron agreement, you acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I, my children and/or my family, may be exposed to and infected with COVID-19 while being at DuPage Swimming Center, and that such exposure or infection may result in illness, personal injury, permanent disability, and/or death. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury resulting from exposure to COVID-19 (including, but not limited to, personal injury, disability, and/or death) to myself, my children and my family. I understand that any time a patron feels like the risk is too great to attend, the patron can request to be removed from the schedule.

I hereby release, covenant not to sue, discharge, and hold harmless DuPage Swimming Center, its employees, agents, and representatives from any claims arising out of the my, my children and/or my family's exposure to COVID-19, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of DuPage Swimming Center and its employees, agents, and representatives and any facilities that you attend, whether a COVID-19 infection occurs before, during, or after being at DuPage Swimming Center. I also agree to ensure that I and my family understand and will follow all of the precautions put in place by Swimming Center.

_____ Name Printed

_____ Signature

_____ Date