



Lakeway Swim Center Membership & Pass Registration Form

New

Renewal

Last Name:	First Name:
Address:	City: State: Zip:
Home Phone #	Cell Phone #
Email Address:	

Memberships & Passes	Resident	Non-Res	AMOUNT
Corporate	\$	600	
*Family (up to 6)	\$ 365	\$ 475	
*Family Senior (2 adults 55+)	\$ 310	\$ 400	
Individual (18-54 yrs.)	\$ 245	\$ 325	
Individual Senior (55+)	\$ 210	\$ 275	
Off-Season Pass (10/1/18 - 05/24/19)	\$	195	
Off-Season Monthly Pass	\$ 30	\$ 40	
	TOTAL		\$

*(*Family consists of individuals living at the same address.)*

Please list name & age of each family member.

1	4
2	5
3	6

*Extended family/guests are required to pay the daily rate.
Residents are those who reside within the City of Lakeway. This does not include The Hills, Bee Cave, Spicewood etc.
Residency can be proved by showing proof of address on a bill, driver's license etc.*

PAYMENT: Cash _____ Check # _____ Credit Card _____ Exp. _____ CVV _____

INDEMNITY: Member agrees that City will not be liable for any property damage, personal injury or loss of life occasioned by or in connection with the use of the premises, except as may be provided by applicable law with respect to the sole negligence of agents of the City. Member hereby assumes full responsibility for the acts and conduct of all invitees of Member and all persons admitted on the premises by Member, its agents, employees or representatives. Member hereby indemnifies the City from any claim, demand, cause of action, damages, and liabilities, including reasonable attorneys' fees incurred in defending same, which may arise out of or be caused by or in any way connected with Member's use of the premises by Member, its invitees, agents and employees, except as to any such claim, damage, liability of loss caused by the negligence or willful misconduct of the City or any agent of the City.

Lastly, by this document I do hereby authorize the exclusive use by the City of Lakeway of any photograph or photographs which the City of Lakeway may take of my participation or my child's participation in the Lakeway Swim Center's authorized activity.

Signature _____ Date _____