



## LANCASTER GOLF CLUB, LLC 2022 Pool Pass Registration Form

\_\_\_\_\_  
Print Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Street Address

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

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Emergency Contact Name/Phone

Type (Please check)

<u>Annual Pass</u>	<u>Without Unlimited Season Golf Pass</u>	<u>With Unlimited Season Golf Pass</u>
<input type="checkbox"/> Family *	<input type="checkbox"/> \$500	<input type="checkbox"/> \$350
<input type="checkbox"/> Single	<input type="checkbox"/> \$300	<input type="checkbox"/> \$150

**Guest Fee:** Guest must be pre-registered with pool management and all fees paid prior to use. The guest fee is \$10 per day per person.

\* Family is defined as one or two adults and their dependent children (22 years of age or younger) all residing at the same address. Childcare providers are not included on a family pass and are subject to the guest fee. If more than one family resides in the same household, each family must purchase a separate Season Pass.

### Family Information

	<u>Name</u>	<u>Date of Birth</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____

If eligible age-wise, as of June 1, then a dependent will be eligible for the remainder of the season.



## Method of Payment

To complete registration, send Registration Form together with payment payable to:

Lancaster Golf Club, LLC  
P.O. Box 266  
Lancaster, Ohio 43130

If you choose to pay by credit card, provide the following:

Name of Cardholder: \_\_\_\_\_  
Account #: \_\_\_\_\_  
Type of Card: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_  
CVC Code: \_\_\_\_\_

\_\_\_\_\_  
Cardholder Signature / Date

In consideration of permission granted to me or my child or dependent or to my guest to engage in recreational activities and reservations, I, the undersigned, on behalf of myself, my heirs, executors, administrators, and assigns and on behalf of my household members, my children, dependents, childcare providers and guests do hereby release, hold harmless, and discharge the Lancaster Golf Club, LLC, its employees, agents, officers, assigns, and volunteers for any and all injuries suffered by myself, and on behalf of my household members, my children, dependents, childcare providers and guests from any and all claims, demands, actions, judgments, and executions, which they may bring related to damages or injuries occurring on the Lancaster Golf Club's premises.

I recognize and voluntarily accept on behalf of myself and on behalf of my children, dependents, household occupants, my childcare providers, and guests, all of the potential risks and hazards associated with participating in said recreational activities, no matter how remote or unlikely.

I hereby acknowledge that I have read and agree to comply with the terms and conditions of this Agreement. I attest that I have read the rules of the Pool attached hereto and agree on behalf of myself, my household occupants, my children, dependents, childcare providers and guests to abide by the rules and the consequences of violations thereof.

## Signature of Each Adult Family Member

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature: (18 or over)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature: (18 or over)

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature: (18 or over)

