CITY OF MIAMI SPRINGS

PARKS AND RECREATION DEPARTMENT
1401 WESTWARD DRIVE
MIAMI SPRINGS, FLORIDA 33166
(305) 805-5075

GYMNASIUM MEMBERSHIP APPLICATION

BY COMPLETING AND SIGNING THIS APPLICATION, THE APPLICANT AGREES TO ABIDE BY ALL GYMNASIUM RULES AND REGULATIONS AND FURTHER AGREE TO INDEMNIFY AND HOLD THE CITY HARMLESS WITH REGARDS TO ANY INJURIES RECEIVED AS A RESULT OF THEIR USE OF THE GYMNASIUM.

Member Name: _____
(Last) **(First)** **(Age/ DOB)**

Address: _____

Telephone: _____or_____

Emergency Contact Name & Number: _____
_____

E-Mail Address (optional): _____

Family Members: _____

FOR OFFICE USE ONLY

	Membership Fee
Amount Paid	
Check #	
Cash/Credit	
Date/Rec#	
ID Card Issued	
Rec'd. By	

MEMBERSHIP RATES
Adult: 18 - 59 $150.00 **– Senior: over 60** $75.00
Athletic shoes **MUST** be worn at all times. **NO** open toe shoes will be permitted

GENERAL AGREEMENT / RELEASE

In consideration for the City of Miami Springs' Parks and Recreation Department providing access to gymnasium,

I, _____, do hereby:
(Print Name)

1) Assume all risk of possible damage or injury through the use of the facility.
2) Agree to compensate the City of Miami Springs for any repair and/or replacement costs for damages to the facility or equipment as a result of my misuse of the equipment.
3) Agree to indemnify and hold harmless the City of Miami Springs and/or its departments, agents or employees from any liability arising out of my use of the gymnasium.

Signature: _____ Date: _____

Parks & Recreation Official: _____ Title: _____ Date: _____