



Renewal

VANDALIA RECREATION CENTER
Optum/Healthy Contributions

PLEASE PRINT

****** If you have *any changes* to previous information – **STOP!** You must complete the long form. This includes changes to your Emergency Contact(s) or any other phone numbers/emails.

LAST Name

FIRST Name

Date of Birth ____/____/____

ZIP CODE _____

Email: _____

Waiver and Release: *In consideration of the City of Vandalia granting me the permission to engage in the recreational activities with the Vandalia Recreation Department, the undersigned does hereby waive, release, save and hold harmless and indemnify the City of Vandalia, its employees, agents and independent contractors for any and all claims for damage or personal injury to me or loss of property which may be caused by any act or failure to act on the part of the City of Vandalia, its employees, agents and independent contractors. The undersigned further assumes the risk of all dangerous conditions in and about the City of Vandalia Recreation Department property both real and personal and waive any and all specific notice of the existence of such dangerous conditions, if any. Furthermore, the release bars claims by the undersigned's children, heirs, assigns, executors and administrators.*

Signature of Member (18 years or older)

Date

OFFICE USE ONLY:

Fitness ID Number (all numbers begin with a "S" or "A" and should not include dashes when entering on our system.)
