

**SCOTTS MILL RECREATION CENTER
2010 SEASON REGISTRATION FORM**

Member's Last Name: _____

Principal Member(s): _____

Children's name(s) and current ages(s): * _____

Other relatives living with you: _____

Designated Caregiver: _____

Home Address: _____

Please circle one: (**Renewal / New membership**) Residence Phone: _____

Member's Work Phone: _____ Cell Phone: _____

Member's Work Phone: _____ Cell Phone: _____

E-mail Address: _____

EMERGENCY
CONTACT: _____ Phone: _____

HOSPITAL PREFERENCE: _____

INSURANCE CARRIER: _____

KNOWN MEDICAL CONDITIONS OR ALLERGIES: _____

* *Children ages must be included to validate membership*

I acknowledge that SCOTTS MILL RECREATION CENTER is governed by policies, rules, and regulations. Failure to abide by policies, rules, and regulation may result in the revocation of your membership.

Signed: _____ Date: _____
MEMBER NAME

Signed: _____ Date: _____
MEMBER NAME

(All family members over the age of 18 must read and sign the "Assumption of Risk and Waiver Agreement" on the back of the registration form.)

Mail completed form to:
Scotts Mill Homeowners Association
c/o Omega Association Management
1010 Buck Jones Road
Raleigh, NC 27606

**SCOTTS MILL RECREATION CENTER
ASSUMPTION OF RISK AND WAIVER
AGREEMENT**

Assumption of Risk: I understand that SCOTTS MILL RECREATION CENTER facilities are unsupervised (except the pool during lifeguard hours) and I further understand that I, or anyone in my custody or control or under my own personal supervision (including minor children), may be exposed to hazards including but not limited to injury, illness, loss of life or damage to property through use of the pool or any SCOTTS MILL RECREATION CENTER facilities. I hereby assume all risk of injury, illness, loss of life or loss of or damage to property to myself and anyone in my custody or control or under my own personal supervision (including minor children) arising out of or relating to our use of the pool (including life guarded hours) or any of the facilities on SCOTTS MILL RECREATION CENTER property.

Waiver: In consideration for Scotts Mill Homeowners Association, its successors or assigns, permitting me and those in my custody or control or under my own personal supervision (including minor children) to use SCOTTS MILL RECREATION CENTER facilities, I specifically release and forever discharge Scotts Mill Homeowners Association, its successors or assigns, and its officers, agents, and employees from any and all liability or claims for any injury, illness, loss of life or loss of or damage to property which I or anyone in my custody or control or under my own personal supervision (including minor children) may suffer arising out of or relating to our use of the pool or any of the facilities on SCOTTS MILL RECREATION CENTER property.

In signing this document, I fully recognize that if injury, illness, loss of life or loss of, or damage to property occurs to me, or anyone in my custody or control or under my own personal supervision (including minor children), arising out of or relating to our use of the pool or any of the facilities on SCOTTS MILL RECREATION CENTER property, I have no right to make a claim or file a lawsuit against Scotts Mill Homeowners Association, its successors or assigns or officers, agents or employees of Scotts Mill Homeowners Association, its successors or assigns, even if they or any of them negligently cause my, or those in my custody or control or under my own personal supervision (including minor children), injury, illness, loss of life or loss of or damage to property.

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND ITS CONTENTS. I AM AWARE THIS IS A WAIVER AND A RELEASE OF LIABILITY AND I SIGN IT VOLUNTARILY.

This the _____ day of _____ 2010

Signature: _____ Printed Name: _____
Adult Member

Signature: _____ Printed Name: _____
Adult Member

Signature: _____ Printed Name: _____
Adult Member

Address: _____

EVERY ADULT MEMBER (18 YRS AND OLDER) OF THE HOUSEHOLD MUST SIGN THIS FORM.