



# Recreation Program & CRCC Membership Form

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**PROGRAM REGISTRATION MAIL-IN/DROP OFF:** Fill out the enclosed registration form, make checks payable to Town of Carbondale, and mail or bring into the Town of Carbondale Recreation and Community Center at 567 Colorado Ave, Carbondale, CO 81623. If you would like confirmation, please enclose a self addressed stamped envelope. For your protection, please send check or money order only. **\*\*This does not secure a spot in a class (First Come, First Serve).**

**PROGRAM REGISTRATION WALK-IN:** You may walk-in to register for classes or programs any time the Recreation & Community Center is open.

**PROGRAM REGISTRATION ONLINE:** You may register for programs and classes online at [www.carbondalerec.com](http://www.carbondalerec.com). (Visa, Mastercard, or Discover Only)

**PROGRAM CANCELLATION POLICY:** The Carbondale Recreation Department has a 48 hour cancellation policy for all programs. Failure to give 48 hours notice will result in a non-refund of your registration fee for that program. Cancellations made prior to 48 hours will result in a full refund minus a \$10 administration fee.

*\*\*We will notify you if the class or program is full or cancelled. Checks returned for insufficient funds will be assessed a \$20 processing fee. Program schedules, as published in the brochure, are subject to change or cancellation. Min/Max: If the set minimum is not met for any given class, the class is cancelled and transfers or refunds are made to the registered individuals.*

**MEMBERSHIP POLICIES:** Photo ID required for all CRCC memberships. Parent/guardian signature required for anyone under 18. ALL CRCC MEMBERSHIIPS ARE NON-REFUNDABLE AND NON-TRANSFERABLE.

Parent/Members Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_  Check here if you would like to be included on our distribution lists

Phone (H): \_\_\_\_\_ (C) \_\_\_\_\_

Health Issues: \_\_\_\_\_  Check here if you would like to be a volunteer coach

Emergency Contact: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: (C) \_\_\_\_\_

Participant/Dependents	Sex	Birth Date	Activity/Membership	Fee

Please describe any health issues that dependents may have:

\_\_\_\_\_

**Liability Waiver Release:** The undersigned, in consideration of and as part payment for the right to participate in the activity(ies) of the Carbondale Recreation Department described above, hereby acknowledges the existence of and assumes all risk connected with the activity(ies) described above. The undersigned further releases the Town of Carbondale and all persons and entities participating in connect with or on behalf of the Town of Carbondale in activity(ies) above, and including by way of example acts of negligence of the Town of Carbondale or any entity or person acting on its behalf. The undersigned also releases the Town of Carbondale to use any photos or video taken during the above mentioned activity or event, for any Town publication or advertisement, and to place any persons participating in the activity(ies) above on applicable department email distribution lists.

I further acknowledge and accept that there are presently additional health risks associated with my participation in this program during the COVID-19 pandemic, and hereby agree to comply with all Town of Carbondale regulations, policies and rules related to the COVID-19 pandemic for so long as the ongoing local COVID-19 health emergency exists as declared by the Town of Carbondale Board of Trustees. With full awareness and appreciation of the risks involved, I also hereby forever release, waive, discharge, and covenant not to sue, the Town of Carbondale, its Parks & Recreation department, officers, employees and agents, with regard to any and all liability, claims, demands, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, or injury, including death, I may sustain related to COVID-19 due to my participation in this program, regardless of any negligence by the Town or its officers, employees and/or agents.

Signature of Parent or Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name, First Name  
Staff Use Only

# General Info

- Facility Hours will be Monday-Friday 8am-4pm
- Senior/Vulnerable Patron hours Monday, Wednesday, Friday 8am-9:30am
- No climbing wall use
- No sport courts
- Limited in-person fitness classes (held outdoors); max 10 per class
- No vending machine usage
- No use of lockers, activity room, kitchen, showers\*
- Limited use of fitness equipment
- No lobby furniture, seating area
- No gathering or loitering allowed

*\*Showers available Tuesday and Thursday from 2-3:30pm for local homeless and those without access to shower facilities*

# Operations

- Patrons must reserve a time slot online prior to entering the facility. Time slots will be in 1.5 hour increments.
- Monday, Wednesday, Fridays 8am-9:30am are reserved for Seniors/Vulnerable population
- You must be 16 years old to work out.
- There will be 12x12 foot designated spaces for each piece of work out equipment. All cardio equipment will be located inside the basketball gymnasium.
- Patrons must remain in their designated work out station and cannot share with anyone. NO EXCEPTIONS.
- The front desk will have a “glass-shield” to protect staff and patrons during interactions.
- Signage will be placed throughout the facility to indicate CDC guidelines, social distancing and proper hygiene protocols.
- We will only allow those to enter during their reserved time slot. Entrances and exits will be labeled.
- Patrons will be required to maintain 6ft social distancing.
- Patrons will continue to wear a mask while walking in and around the facility. Once the patron is at a workout station, they will be able to remove the mask for their workout.
- There will be one designated entrance point, with one designated exit point in the lobby.
- Memberships are not currently honored, nor being sold. All drop-ins are a \$4 daily fee to come use our facility. Refunds or pro-rated memberships will be case-by-case and discussed with management. (We will accept SilverSneakers, Silver&Fit, Active&Fit, and Renew Active, but you must call to schedule your time to use these memberships.)
- The facility will have a clear “flow of traffic” plan with designated arrows on the ground. One entrance and one exit into the gymnasium. One entrance one exit inside the lobby.
- One person allowed at a time inside the restrooms. No locker use.

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_

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