

Welcome, and thank you for choosing Crestbrook!

2017 BAR CODE _____

THE GOLF COURSE AT CRESTBROOK PARK

2017 GOLF PASS

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ TOWN: _____ ZIP: _____

DATE OF BIRTH: _____ AGE: _____ TELEPHONE: _____

DRIVERS LICENSE #: _____ STATE: _____ EXPIRATION DATE: _____

PROOF OF RESIDENCY: () DRIVERS LICENSE () UTILITY BILL () OTHER _____

EMAIL ADDRESS: _____

TYPE OF SEASON TICKET

	<u>RESIDENT</u>	<u>NON-RESIDENT</u>
FULL - Age 18 and older	\$ 825.00	\$ 930.00
FULL - Surcharge Included	\$ 975.00	\$ 1,075.00
SENIOR - Ages 62 and older	\$ 465.00	\$ 570.00
SENIOR - Surcharge Included	\$ 565.00	\$ 670.00
JUNIOR - Ages 10 to 17	\$ 235.00	\$ 235.00
COLLEGE - 12 or more credits	\$ 420.00	\$ 420.00
FAMILY GOLF Package	\$ 1,550.00	\$ 2,100.00

Payment Type: Cash, Check, Master Card, Visa
PLEASE MAKE CHECKS PAYABLE TO "TOWN OF WATERTOWN"

ACKNOWLEDGEMENT AND WAIVER

I HEREBY AGREE THAT I WILL FOLLOW ALL THE RULES AND REGULATIONS GOVERNING THE USE OF ALL TOWN OF WATERTOWN, CONNECTICUT CRESTBROOK PARK FACILITIES AND THAT THE INFORMATION I SUPPLIED IS TRUE, CORRECT AND COMPLETE. I UNDERSTAND THAT FAILURE TO COMPLY WITH THE PARK RULES OR FALSIFICATION OF THIS PERMIT INFORMATION MAY RESULT IN REVOCATION OF THE PERMIT BY THE WATERTOWN PARKS AND RECREATION COMMISSION. I HAVE READ, RECEIVED AND UNDERSTAND THE POLICIES, RULES AND PROCEDURES GOVERNING CRESTBROOK PARK. I WILL BE PRACTICING AND PARTAKING COMPETITIVELY, I ALSO HEREBY IN THE EVENT OF AN ACCIDENT AND/OR INCIDENT, WAIVE ALL CLAIMS AND/OR DAMAGES AGAINST THE TOWN OF WATERTOWN, CONNECTICUT, THE WATERTOWN PARKS AND RECREATION DEPARTMENT AND COMMISSION, AND/OR THEIR EMPLOYEES, INSTRUCTORS, AND/OR THEIR AGENTS. THE UNDERSIGNED, HEREBY RELEASES THE TOWN OF WATERTOWN AND INSTRUCTORS, FROM ALL ACTION, CAUSE OF ACTION, SUITS, CONTROVERSIES, PROMISES, DAMAGES, JUDGMENTS, EXTENT, EXECUTION, CLAIMS AND DAMAGES WHATSOEVER IN LAW OR EQUITY WHICH AGAINST THE TOWN OF WATERTOWN BY MYSELF, MY HEIRS, OR HEREAFTER CAN, SHALL OR MAY, HAVE FOR, UPON, OR BY REASON OF ANY MATTER, CAUSE OR THING WHATSOEVER FROM THE BEGINNING OF THE WORLD AND FOREVER HEREAFTER IN CONNECTION WITH MY PARTICIPATION IN SPORTS, AND RECREATIONAL ACTIVITIES UPON PREMISES AND/OR LANDS OWNED BY THE TOWN OF WATERTOWN. IN PARTICIPATING IN SAID RECREATIONAL ACTIVITIES/CONTACT SPORTS I UNDERSTAND THAT THERE ARE CERTAIN RISKS THAT I MAY BE INJURED OR INCUR PHYSICAL HARM OR INJURY AND I ASSUME SAID RISKS OF MY OWN FREE WILL KNOWING THAT I SHALL BEAR FULL RESPONSIBILITY FOR MEDICAL COST, CARE TREATMENTS, OR ANY OTHER COSTS OR DAMAGES TO ME AS A RESULT OF SAID INJURIES. I UNDERSTAND THAT CRESTBROOK PARK GOLF COURSE IS A PLAY AT YOUR OWN RISK FACILITY. THE INFORMATION I HAVE SUPPLIED IS FACTUAL AND TRUE.

APPLICANT'S SIGNATURE: _____ DATED: _____
***** IF APPLICANT IS 17 YEARS OF AGE OR YOUNGER, PARENTS/GUARDIANS SIGNATURE IS REQUIRED BELOW.

PARENT/GUARDIAN SIGNATURE: _____ DATED: _____

For office use only

Amount Received _____ Check # _____ Cash _____ Credit Card /Type of Card: MC Visa

ID Verified: Y Initials: _____ DATE RECEIVED BY OFFICE: _____
Form of ID _____