MEMBERSHIP PLANS

Choose Your Plan

- Resident
  - Individual college student

- Non-Resident
  - Individual college student

2020 RATES

Circle Your Payment Option

*The 3-Month plan must be paid in full at time of activation.

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<th>Residents</th>
<th>Non-Residents</th>
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<td>Individual</td>
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INFORMATION

Thank you for providing the following information. This helps us develop quality services and programming that fits the needs of the local community.

- How did you learn about the Olathe Community Center?
  - Drove by Center
  - Online
  - Direct Mail Flyer
  - Took a Tour of Center
  - Referred by Current Member:
    - Member’s First & Last Name: ____________________________
  - Other: ____________________________

Today’s Date: _____/_____/_____

Photos are required for each card holder/member.

We reserve the right to close the building annually for scheduled maintenance. Thank you for your patience as we work to keep our facility fresh to enjoy for years to come.
Terms of Membership

By signing this MEMBERSHIP APPLICATION, I (we) agree to the following: (1) member and any guests in his/her party will abide by the terms of this Agreement at all times during the period of membership and will comply with all rules and regulations posted or otherwise communicated to member, (2) in case of illness or injury, the City of Olathe is authorized to secure emergency medical treatment at the member’s expense, (3) the City of Olathe reserves the right to remove from the Olathe Community Center or terminate the membership of any member who fails to comply with any rules and regulations or otherwise breaches the terms of this Agreement, in which case the member will not be entitled to a refund of fees, and (4) membership rights are not transferable.

LIABILITY WAIVER - I understand that use of the facilities and equipment at the Olathe Community Center may involve risk of bodily injury or property damage and I agree to assume any such risks. I understand that it is up to me to consult physicians and other professionals to make sure that I can safely participate in activities and events at the Olathe Community Center. PARENT/GUARDIAN RELEASE - I, the undersigned, on behalf of myself, my spouse, heirs, assigns, and the members named herein, assume all risks and hazards related to the participant’s participation in any activity conducted at the Olathe Community Center. Further, I do hereby release and hold harmless the City of Olathe, its elected and appointed officials and employees associated with the Olathe Community Center from any and all liability and/or claims resulting from injuries, damages, or losses arising out of or in connection with the member’s participation at the Olathe Community Center to the fullest extent permitted by law. I hereby assume all risk or injury, damage, and liability, and waive any right of recovery from or to bring suit against the City of Olathe, to the fullest extent permitted by law, for any illness, personal injury, death, or other consequence arising out of my voluntary participation in these activities.

PHOTO RELEASE - The undersigned and members named herein authorize the City of Olathe to use at its discretion any photograph(s) taken of the member(s) for promotional purposes, including but not limited to print, online, and social networking media while participating in an activity and waive any and all claims that the member or the undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof. I have read the above statement, understand and agree to the conditions set forth.

MEMBER SIGNATURE: ___________________________________________ DATE: ___ / ___ / ___

PARENT/GUARDIAN SIGNATURE: _________________________________ DATE: ___ / ___ / ___

FOR INTERNAL USE ONLY:
Accepted and Entered by: ______________________________________ Date: ___ / ___ / ___

Rev: September 9, 2020

913-971-8563 | WWW.OLATHEKS.ORG/PARKSREC