

Membership & Multi-Visit Pass Application



27 Weld Street, Cnr Weld and Haas Sts Broome WA 6725 09 9191 3456

* R	'ea	ui	red	l Fi	elds

*Surname:	*First Name:	———— M / F (Circle)
*Residential Address :		
*Post Code:	*Mobile Phone:	
*Email:		
*Date of Birth:///		
*Emergency Contact Name:	*Phone No	
*Relation to Contact:		

For Family Access Memberships, please complete details for additional members below

	First Name	Surname	Date of Birth
Second Adult / First Child			
First Child / Second Child			
Second Child / Third Child			
Third Child / Forth Child			

FAMILY MEMBERSHIP: 2 Adults and 3 Children - OR - 1 Adult and 4 Children

MULTI-VISIT PASS OPTIONS (Please indicate your selection)					
		Pool Only	Multi Programs	Racquet Sports	Shootarounds
	10 Visit	\$50.00	\$99.00	\$81.00	\$54.00
Adult	20 Visit	\$99.00	\$196.00	\$162.00	\$108.00
	30 Visit	\$148.50	\$386.00	\$243.00	\$162.00
	10 Visit	\$31.50	\$63.00	\$40.50	\$40.50
Child/Concession	20 Visit	\$63.00	\$124.00	\$81.00	\$81.00
	30 Visit	\$90.00	\$177.50	\$121.50	\$121.50
	10 Visit	\$135.00	\$267.00	\$162.00	\$135.00
Family	20 Visit	\$270.00	\$535.00	\$324.00	\$270.00
	30 Visit	\$405.00	\$802.00	\$468.00	\$405.00

ACCESS MEMBERSHIP OPTIONS (Please indicate your selection)					
		Full Access	Pool Only	Racquet Sports	Shootarounds
	1mnth	\$90.00	\$50.00	\$72.00	\$45.00
Adult	3mnth	\$245.00	\$136.00	\$196.00	\$122.50
Adult	6mnth	\$460.00	\$254.50	\$368.00	\$230.00
	12mnth	\$870.00	\$483.25	\$696.00	\$435.00
	1mnth	\$45.00 / \$46.50	\$30.00	\$36.00	\$22.50
Child / Concession	3mnth	\$117.00 / \$135.00	\$78.00	\$93.50	\$58.50
Child / Concession	6mnth	\$228.75 / \$246.00	\$152.88	\$183.50	\$114.50
	12mnth	\$435.00 / \$456.25	\$290.50	\$348.50	\$217.50
	1mnth	\$136.50	\$90.00	N/A	\$68.25
Family.	3mnth	\$406.00	\$267.50	N/A	\$203.00
Family	6mnth	\$794.00	\$524.00	N/A	\$397.00
	12mnth	\$1,550.00	\$1,022.00	N/A	\$775.00

^{**}Payments can be made by cash, eftpos or credit card. We do not accept Diners or Amex. BRAC does not enter into direct debit agreements. Payment methods as per above only.

^{**}All memberships automatically cease on either the date of expiry or on use of the final visit pass at which time you must renew if you wish to continue your membership.

MEDICAL CONDITIONS Please list any medical conditions you have that may affect your activities at the Centre
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MEMBERSHIP TERMS AND CONDITIONS
 Access cards and Multi Visit passes are not transferrable. Access to squash courts and tennis courts limited to 1 hour maximum hire during peak. times and subject to availability. (Peak time after 6.00pm weekdays) Appropriate attire must be worn whilst in the facility.
4) For your safety and that of others, members and guests are required to follow the directions of centre signange and staff.
5) Memberships are entitled to one suspension of no longer than one (1) month at no charge. Suspension requests must be made in writing to the Manager of Sport & Recreation.
 6) All concession memberships and visit passes are subject to presentation of the relevant concession card. 7) It is a condition of your membership that you will advise of any changes to your medical condition. 8) Refunds on memberships will only be considered for medical reasons on presentation of a medical certificate. Decisions made are at the discretion of management. Fees may apply. 9) Payment methods accepted are cash, eftpos or credit card. AMEX and Diners are not accepted.
10) This agreement is subject to a 48 hour coolong off period which commences at the point of sale. During the cooling off period, you may terminate your membership upon written request addressed to the Manager of Sport & Recreation if required. (Charges will be applied for any sessions undertaken)
11) All refund requests will be submitted to the Shire of Broome Finance department for processing. This will be either via direct transfer or a cheque mailed out to you. A turn around time of approximately two (2) weeks should be expected.
RELEASE FROM INDEMNITY I hereby declare that the information provided on this application is true and correct. I acknowledge and agree that during all such times I am on the premises of the Broome Recreation & Aquatic Centre or it's surrounds, that both my property and my person shall be at my own risk in every respect and thereby disclaim the Shire of Broome and every occupier thereof, all employees, volunteers and invitees to the full extent permitted by law whether in contract or tort, and whether arising out of negligence by any person or otherwise, and from all my liability of any kind which may arise in respect to any accidents or damages to property or injury to person on the Centre premises, or its surrounds. I declare I am in a good state of health, fitness and physical condition and that there is no medical reason whatsoever that could be regarded as a restriction upon, or an impediment to my application for membership. In the event that any infant, minor or mentally or physically impaired person under my control shall accompany me to the Broome Recreation & Aquatic Centre or it's surrounds, and that person suffers any personal injury or loss of property, then I shall indemnify the Shire of Broome against any and all claims, demands and actions made by, or on behalf of said person in my control.
I hereby agree to abide by the rules of this facility and will pay the sum of \$\frac{\state}{2}\$ understand and accept the above conditions of membership.
Member Signature: Date:
Parent / Guardian Signature (if under 18yrs)
Staff Signature: Staff Name:

Receipt Number:_____