



AGREEMENT TO PARTICIPATE – 11 & 12 YEAR OLD RESIDENTS

The Amberly Residents Club activities take place outdoors on the grounds and indoors in the Residents Club. Nature and weather occur on their own schedule and are sometimes unexpected.

It is necessary and appropriate for each of us to take responsibility for ourselves and abide by the rules and supervision of the Amberly Residents Club, its management, and its recreation providers (i.e., Lifestyle Director, camp counselors, and pool lifeguards and staff). We must always be aware of where we are, the rules of participation, the natural conditions around us, and what changes the weather might bring.

_____, a minor, age _____, using the Amberly Residents Club, and we the parent(s) and/or legal guardian(s) of the child, have read, understand, and agree to the following:

- 1. We acknowledge that allowing our child to use the amenities, unsupervised, requires a positive attitude and adherence to all posted rules and directions given by Facility/Pool and Management.
2. We fully understand that outdoor temperatures and occasional storms can be a factor in using the Club Amenities. We further realize that there are elements of physical risk such as injury, drowning, heat exhaustion, heat stroke, dehydration, sunburn, and other weather-related conditions.
3. We understand that there are many unpredictable, changing conditions potentially affecting the availability of the outdoor and indoor facilities.
4. We certify that, to the best of our knowledge, our child has no physical, mental, or emotional condition which might be aggravated by being unsupervised; which might, in any way, inconvenience or endanger other participants or staff; or which might impair our child's ability to monitor their own behavior.

BEHAVIOR EXPECTATIONS AND CONSEQUENCES

As a resident of Amberly, _____ will treat the Residents Club, its staff, and property with the utmost respect, using due diligence to keep themselves and others safe by using sound judgement.

- 1. _____ will check in at the front desk using their designated key tag. Without appropriate identification (key tag), I/we agree that they should not be allowed access to the Residents Club, including the pool.
2. _____ will wear their ID necklace at all times when on the property.
3. _____ will use the approved equipment and property areas as intended, ensuring that all items will be returned undamaged, and the facility be kept clean and undamaged.
4. _____ will refrain from any verbal or physical abuse to others using the facility including the Facility/Pool staff and Management.
5. _____ will obey all posted rules and any instructions from Facility/Pool staff and Management.
6. NO FOOD OR BEVERAGES are allowed in gymnasium other than water.
7. Eleven- and twelve-year-old residents are not allowed to bring a guest or supervise anyone else in the facility at any time. No one under the age of 13 is allowed in the cardio room and no one under the age of 16 is allowed in the strength room.
8. _____ will wear appropriate clothing as required at all times. No open-toe shoes in the gymnasium or soccer field. Flip flops and sandals are permitted on the playground, pool, and inside the building. A shirt will be worn at all times on the premises unless in the pool or on the pool deck.

I/We accept full responsibility for their behavior and actions and understand that following reasonable verbal warning, the following consequences will be implemented should _____ not follow these rules:

Infraction #1:

- Loss of access to all amenities and event/club/lifestyle programming for the remainder of the day
- Parent(s)/Guardian(s) notified

Infraction #2 within six (6) months of 1st Infraction:

- Loss of access to all amenities and event/club/lifestyle programming for 48-hours
- Parent(s)/Guardian(s) notified

Infraction #3 within six (6) months of 2nd Infraction:

- Loss of access to all amenities and event/club/lifestyle programming for a period of seven (7) days
- Parent(s)/Guardian(s) meeting required prior to child's return to the facility

Infraction #4 within six (6) months of 3rd Infraction:

- Revocation/deactivation of key tag and loss of access to all amenities and event/club/lifestyle programming for two (2) weeks
- Parent(s)/Guardian(s) meeting required prior child's return to the facility.

Unlawful misconduct on premises (e.g.: vandalism, trespassing, bullying, fighting, aggravated assault, weapons on premises, etc.) may result in an immediate ejection from the facility and parent(s)/guardian(s) will be notified.

Signature Date

Signature Date

RELEASE AND HOLD HARMLESS STATEMENT

Participation in any Amberly Residents Club activities and use of any recreational facilities involves a risk of accidental injury despite all safety precautions. I/We, as parent(s) or guardian(s) of the participant named herein, assume all risk and hazards incidental to the activities, and release from responsibility and agree to indemnify and hold harmless Amberly Master Property Owners Association, Inc., NFC Amenity, York Properties, Aquatics Management Group, their officers, directors, independent contractors, and all employees for any illness or injury to me, my children, family members, or guests occurring during his/her/our/their participation.

We/I have read the Agreement to Participate, Behavior Expectations and Consequences, Emergency Authorization, and Release and Hold Harmless statements and understand their terms and accept their conditions. If this Agreement is executed by one parent or guardian, I acknowledge that I am also acting as the agent of the other parent or guardian with authority to allow my child to be unsupervised onsite and to execute this agreement upon the representations herein made in accepting this enrollment.

I/We understand the agreement and have discussed this with my child. This agreement will remain on file for the year 2022 unless my consent is revoked in writing.

Signature Date

Name – please print Relationship – please print

Signature Date

Name – please print Relationship – please print

EMERGENCY AUTHORIZATION

Emergency Contact Name: _____
Please print

Emergency Contact Phone Number: _____
 Home Work Cell

Consent to Call Emergency Department: Yes No Key Tag #: _____

OFFICE USE ONLY – I have witnessed the signature of the above Amberly resident(s) on this date.

Staff Signature Date