

NORDBY CENTER FOR RECREATION

2023 Dakotaland FCU

15% Annual Membership Discount Application January 1, 2023 through December 31, 2023

Corporate rates	Compared to:				Nordby Center rates	
ANNUAL ÷ 12 MONTHS \$ 705.50 \$ 58.80 \$ 620.00 \$ 51.66 \$ 595.00 \$ 49.60 \$ 488.75 \$ 40.74 \$ 370.00 \$ 30.85	FAMILY (2 adu ONE PARENT SINGLE adult SINGLE adult Youth HS 9 th	household + 1 same hous	ANNUAL \$ 830.00 \$ 730.00 \$ 710.09 \$ 575.00 \$ 370.00	MONTH \$ 95.00 \$ 85.00 \$ 85.00 \$ 70.00 \$ 60.00		
RST NAME	MI	LAST NAME			DOB	SEX M F
DRESS			CITY / STAT	E / ZIP		
ELL PHONE	EMERGENCY PHONE EMAIL			<u>IL</u>		
NAME	ER MEMBERS				RSHIP TONSHIP	
understand and agree that this nd if I terminate this contract, I sed and a <u>cancellation fee</u> . Ca *Members over the age of 14 a	will be charged 1 ncellation forms	The Nordby Ce must be paid &	nter for Recrea	tion <u>month</u> The Nordb	by month ray Center for	ate for the montl Recreation.
				F	Office Use On	ly—Main Member#

allowed. If you are already a corporate member, we strongly encourage you to stay with your business.

Nordby Center for Recreation Location: 1700 Lincoln Ave SW

Huron, SD 57350 Phone: 605-352-2627 **Nordby Center for Recreation** Mailing address: P O Box 1316 Huron, SD 57350

E-mail: membership@nordbycenter.org

2023 RELEASE OF LIABILITY - READ BEFORE SIGNING

In consideration of being allowed to participate in any way at the Nordby Center for Recreation program, related events and activities, the undersigned acknowledges, appreciates and agrees that:

- The risk of injury from the activities involved in this program is significant, including the potential
 for permanent paralysis and death, and while particular rules, equipment, and personal discipline
 may reduce this risk, the risk of serious injury does exists; and,
- 2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation; and,
- I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest officials immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representative and the next of kin, hereby release and hold harmless the Nordby Center for Recreation, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Releasees"), with respect to all and any injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releasees or otherwise, to the fullest extent permitted by law.
- 5. I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing and masks. I further acknowledge that the Nordby Center for Recreation has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that the Nordby Center cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Nordby Center staff, and other clients and their families. I voluntarily seek services provided by the Nordby Center for Recreation and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while participating in activities at the center.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITH ANY INDUCEMENT.

PRINT PARTICIPANT'S NAME	
PARTICIPANT'S SIGNATURE	DATE
(UNDER AGE 18 This is to certify that I, as parent/guardic consent and agree to his/her release, a my heirs, assigns, and next of kin, I rele	IS OF PARTICIPANTS OF MINORITY AGE B AT TIME OF REGISTRATION) In with legal responsibility for this participant, do as provided above, of all the Releasees, an, for myself cease and agree to indemnify and hold involvement or rided above, even if arising from their negligence, to

EMERGENCY PHONE

PARENT/GUARDIAN SIGNATURE



1371 Dakota Avenue South | Huron, SD 57350 605.352.2845 | www.DakotalandFCU.com

Nordby Membership ACH Authorization

Member Name:	
Monthly Membership Fee: \$	
Enrollment Date:	
Start ACH Date:	
(first 10 th of the month following enrollr	nent date)
End ACH Date:	
(12 th monthly payment)	
Account Number:	
Account Type: Savings Checking	
Routing: <u>291479356</u>	
I hereby authorize Dakotaland Federal Credit Union to necessary, credit entries and adjustments for any deb	
This authorization will remain in effect for a period of your payment overdraws your account you will incur a account. Signer agrees that all ACH transactions will on the laws of the United States.	\$28 NSF fee that will be debited from your
Signature: Date	9: