Nordby Center for Recreation

Annual Membership 15% discount application

DAKOTALAND FCU

January 1, 2025—Dec. 31, 2025

Corporate	Rates	Membership types			Nordby Center Rates	
ANNUAL	÷ 12 MONTHS		Includes tax		<u>ANNUAL</u>	MONTI
\$705.50	\$58.80	Family (2 partners & dependents under 19 on taxes)			\$830.00	\$95.0
\$620.00	\$51.66	One Parent home (parent & dependents on taxes)			\$730.00	\$85.0
\$595.00	\$49.60	Single adult + 1 (partner or child under 19 on taxes)			\$710.00	\$85.0
\$488.75	\$40.74	Single adult		\$575.00	\$70.0	
\$400.00	\$33.34	HS Youth 9th - 12th gr.		\$400.00	\$66.0	
FIRST NAM SEX	E	MI	LAST NAME		<u>DOB</u>	
ADDRESS				CITY / STATE/ ZIP		
CELL PHON	E	EMER	GENCY PHONE	EMAIL		
		DTHE	R QUALIFYING MEI	MBERS TO ADD		
NAME			<u>DOB</u>	<u>SEX</u>	RELATI	ONSHIP
terminate th	is contract I will be <u>llation fee</u> . 30 day	e charg notice	annual membership. I am ged The Nordby Center for figured into cancellation f ation. Replacement card f	Recreation month ra ee. Cancellation form	te for each mont	h used
Signature			 Date		Office Use Only—Ma	ain Member

*When you sign this form, you will no longer be eligible to participate in any other corporate discount. Only 1 discount is allowed. If you are already a corporate member, we strongly encourage you to stay with your business.

2025

-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,
- 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,
- 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.
- 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.

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

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

DATE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release, as provided above, of all the Releasees, an, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold involvement or participation in these programs as provided above, even if arising from their negligence, to the fullest extent permitted by law.

gence, to the fullest extent permitted by law.	
PARENT/GUARDIAN SIGNATURE	DATE
Emergency Phone:	

PARTICIPANT'S SIGNATURE