

Continental Country Club
2019-2020 Social Membership Application

Account #: _____ Last Name: _____

OFFICE USE ONLY

Paid by: Cash Check Credit Card **ID Works:** _____ **BW:** _____ **Initial:** _____

The Social Memberships are offered to families who live outside the confines of the Continental Country Club HOA. These memberships offer access to Continental's amenities including: the Clubhouse swimming pool, Fitness Center, access to the tennis/pickleball courts, as well as use of the Bear Paw Recreation Center.

Social Membership Options

\$450 6-month Membership

\$650 Annual Membership

EXP: ____/____/____

Member 1: _____

Member 2: _____

Dependents up to the age of 24 if unmarried full-time students

Dependent 1: _____ Date of Birth: ____/____/____

Dependent 2: _____ Date of Birth: ____/____/____

Additional dependents beyond 2 are \$50 a piece

Additional Dependent (\$50): _____ DOB: ____/____/____

Additional Dependent (\$50): _____ DOB: ____/____/____

Mailing Address: _____

Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

OFFICE USE ONLY

Printed/Coded

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Printed/Coded

Printed/Coded

Printed/Coded

I understand the following conditions of the Social Memberships:

- *Memberships are non-transferrable*
- *Guests must be accompanied by a member and have a Guest Pass in order to gain access to the amenities.*
- *Grandkids must be accompanied by the grandparent that is a member to gain access to the amenities*

Signature: _____ **Date:** _____

**Continental Country Club
2019-2020 Liability Waiver**

I understand that although the Continental Country Club's facilities, equipment, services, and programs are designed to provide a safe level of beneficial exercise and enjoyment, there is an inherent risk that use of such facilities, equipment, services, and programs may result in personal injury. I also understand that there will be no Continental Country Club staff present in the building prior to or after the normal operating hours of the facility, or on certain holidays (hours will be posted). *I understand that no child under the age of 12 may enter and use the Fitness Center facilities.*

By my signature below, I hereby agree to assume all risk of injury to me and/or my guest(s) while using any of the Club's facilities, equipment, services, or programs. I hereby waive any and all claims or actions I may have against Continental Country Club and its employees as a result of such injury, be it is as a result of using the equipment and facilities (e.g. use of the exercise equipment or machines, accidental injuries on the site of Continental Country Club, etc.), due to a medical condition, or a combination of both. Each member of my household who signs below understands and agrees to adhere to this waiver of liability.

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____