



MOUNTAINBROOK CLUB, INC.

2016 MEMBER WAIVER

Member Name: _____

EMERGENCY CONTACT INFORMATION

Please provide the name(s) of up to 2 persons who can be contacted in case of an emergency.

Emergency Contact #1

Full name:

Relationship to Member:

Phone Numbers (indicate home, work, or cell):

Emergency Contact #2

Full name:

Relationship to Member:

Phone Numbers (indicate home, work, or cell):

Please list all known allergies to any medicines: (write in more if needed)

Member Name: (note parent or child if names are same)	List Allergies:



MOUNTAINBROOK CLUB, INC.

2016 MEMBER WAIVER

Member Name: _____

By my signature below, I certify that...

- if a medical emergency occurs and none of the above-named people can be contacted, the staff of the Mountainbrook Club has permission to seek emergency treatment at the nearest hospital;
- the Member information above provided is true and accurate;
- I have been provided with a copy of the Mountainbrook Rules which are located on the club website for members to access, and my family understands and agrees to the terms described therein, including the following Indemnification/Waiver of Liability/Deemed Consent:

Acceptance of my MEMBERSHIP into Mountainbrook Club, hereinafter referred to as MBC, is without assumption of responsibility of any kind by MBC, its Employee(s), Committee(s), and its Board of Directors and Officers, or the Management of any event in which I/we may be entered or may participate. In consideration of the acceptance of my MEMBERSHIP, I do hereby, for, and on behalf of, myself and my heirs and legal representatives, release and forever discharge MBC, its officers and management, and their successors and assigns, from any and all claims and demands of every kind, nature and character which I may have or hereafter acquire for any and all damages, losses, or injuries which may be suffered or sustained by me or my family or heirs, in connection with my activities during the period for which MEMBERSHIP is granted, and all such claims are hereby waived and released, and I covenant not to sue therefore. I understand and acknowledge that the Baby Pool is NEVER monitored by a lifeguard, and children MUST ALWAYS be DIRECTLY supervised by an adult. The PRIMARY responsibility for the Health and Safety of myself, and those in my care, is solely mine.

In the event I, or anyone associated with my Membership, brings a Guest to MBC, I will inform them, prior to their use of the facility, that they are bound by the Rules, Indemnification, Waiver of Liability, and Deemed Consent.

Member Signature

Date

Member Signature

Date

Adult Child Signature (18 or over)

Date

Adult Child Signature (18 or over)

Date

Adult Child Signature (18 or over)

Date