

Whispering Oaks Swim & Tennis Club  
After-Hour Key Regulations, Registration, Waiver & Release

After-Hours swimming is a supplemental program designed only for full paid members, that may wish to swim outside the regular hours when **life guards are not provided**. Only registered After-Hour swimmers are permitted to use the pool for this purpose.

**The following regulations are required of all After-Hour swimmers:**

In exchange for the privilege of being allowed to swim After-Hours at the Whispering Oaks Club pool, **I agree to abide by the following:**

- \_\_\_ \* **to swim at my own risk** when a properly credentialed life guard is not present;
- \_\_\_ \* to swim in the company of at least one adult; to be present with minors (below 18 years of age.)
- \_\_\_ \* to allow only immediate family members listed on the membership form of the After Hours key holder to swim after-hours OR a member of a registered Key Holder Family.
- \_\_\_ \* to not have recently consumed or to consume alcoholic beverages while swimming during After-Hours;
- \_\_\_ \* to allow only one at a time on slide and observe height and rules requirements, **NO DIVING OR JUMPING FROM SLIDE.**
- \_\_\_ \* to have a cell phone for emergency purposes during the After-Hours swimming session (office access is unavailable);
- \_\_\_ \* to NOT swim between the hours of 11:00 pm and 6:00 am;
- \_\_\_ \* to abide by the policy of "Adults only before 9:00 AM", unless swim lessons; or one child in carrier.
- \_\_\_ \* to use the pool key only for swimming purposes, (initial key cost is \$35.00, and the replacement fee for lost keys is \$25);
- \_\_\_ \* **NO GLASS - NO SMOKING ON GROUNDS - NO DOGS**
- \_\_\_ \* **to hold harmless the Whispering Oaks Club, its Officers, Directors and Members against any liability(ies) resulting from my use-of the facility;**

If any of the above rules are violated by the After-Hours Member:

**1<sup>st</sup> occurrence-** Verbal warning and notation of infraction, **non-family members will be asked to leave the premises**

**2<sup>nd</sup> occurrence-** Loss of membership and forfeiture of membership dues for that season

# FOB Holder Information

(please print all information)

Last Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name of Family Member	Relationship to Key Holder
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

I have read and agree to the following terms and conditions listed on the reverse side of this form.

FOB Holder Signature \_\_\_\_\_

FOB Number \_\_\_\_\_

Tennis Key # \_\_\_\_\_

I certify that the above listed Key Holder has been given the above listed key(s).

\_\_\_\_\_  
(Board Member Name)

\_\_\_\_\_  
(Date)