Quality Time Agreement

Quality time has been set aside for Rec Center members and their children 5 through 11 years of age to have a place and time to play and have fun **together**. Quality Time participants may use the unreserved playing courts (basketball/volleyball and racquetball), the track, and the step and main aerobics areas.

The following equipment and areas are to be reserved for member use only and are strictly **off limits to Quality Time participants**: all fitness equipment including but not limited to the cardiovascular exercise units (bikes, treadmills, stair machines, etc.), the weight training equipment including free weights, and any other area or equipment deemed inappropriate for Quality Time.

Quality Times means the parent spends time participating in an activity with their child(ren). A parent exercising while their child is within sight does not qualify as participating together. We are requiring parents rather than staff to be responsible for the behavior and actions of Quality Time children. By signing this contract, you are agreeing to abide by these rules and all other Rec Center policies and procedures. Violation of this agreement may result in suspension or termination of the Quality Time privilege.

In consideration of Collins Aerospace Rec Center allowing me and my family to use these facilities, I hereby forever release Collins Aerospace, its officers, directors, employees, subcontractors, and affiliated companies from all liability for any and all damages and injuries, including death, suffered by myself or my family in connection with said use of these facilities. I understand that participation by myself and my family members is entirely by my own choice and with the understanding of risk or accidental injuries involved in any fitness activity within the Rec Center. I also assume full financial responsibility for any property damage or personal injury resulting from the actions of myself or my family.

_____ _____

Parent Signature Print Name

Children:

_____ dob_____/_____/_____

_____ dob_____/_____/_____

_____ dob_____/_____/_____

_____ dob_____/_____/_____

_____ dob_____/_____/_____

_____ dob_____/_____/_____

_____ _____

Date Staff Witness

Original to member's file, copy to member.