City of Lakeway
Parks and Recreation Department
YEAR: _____

Per Household

☐ New
☐ Renew
☐ Reinstate

Registration Form ☐ Resident $15.00 ☐ Non-resident $70.00

Primary Last Name First Name Birthdate

Spouse's Last Name First Name Birthdate

Address: City State Zip

Home phone # Work Phone # Cell #

Emergency Contact #

E-mail address:

Additional Family Members living at this address:	Birthdate
1	
2	
3	
4	
5	

	Resident	Non-Resident	AMOUNT

Mail Payment to: Lakeway Activity Center, 105 Cross Creek, Lakeway, TX 78734
www.lakeway-tx.gov
(512) 261-1010

TOTAL $

PAYMENT: Cash____ Check #_____ VISA____ MasterCard____ Discover _____ Exp. _____
Card Number_____ Name on card_____
Receipt _____ Date Paid-

INDEMNITY: Member agrees that City will not be liable for any property damage, personal injury or loss of life occasioned by or in connection with the use of the premises, except as may be provided by applicable law with respect to the sole negligence of agents of the City. Member hereby assumes full responsibility for the acts and conduct of all invitees of Member an all persons admitted on the premises by Member, its agents, employees or representatives. Member hereby indemnifies the City from any claim, demand, cause of action, damages, and liabilities, including reasonable attorneys' fees incurred in defending same, which may arise out of or be caused by or in any way connected with Member's use of the premises by Member, its entities, agents and employees, except as to any such claim, damage, liability of loss caused by the negligence or willful misconduct of the City or any agent of the City. Lastly, by this document I do hereby authorize the exclusive use by the City of Lakeway of any photograph or photographs which the City of Lakeway may take of my participation in the Lakeway Activity Center's authorized activity.

Signature _____ Date _____