

**RECREATION CENTER APPLICATION  
VILLAGE OF MACKINAW CITY  
102 S. Huron Avenue, Mackinaw City, MI 49701  
(Expires December 31)**

Date: \_\_\_\_\_

Application/ID No. \_\_\_\_\_

Regular Family Pass – Fee \$30.00: \_\_\_\_\_

Senior Citizen Pass – Fee \$6.00: \_\_\_\_\_

Regular Family Pass – Plus One Member for  
Drop In Hockey – Fee \$60.00: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Names of Family Members (living at the above address only): \_\_\_\_\_

Home Telephone No.: \_\_\_\_\_ Work/Day Telephone: \_\_\_\_\_

The Village of Mackinaw City is dedicated to providing safe, well-maintained recreational facilities. However, users of the Recreation Center must recognize that programs, events and activities of a physical nature involve some risk and that by your participation you are assuming the risk of physical injury or death.

I understand that the Village of Mackinaw City does not carry accident, sickness or medical insurance for users of the Recreation Center.

I understand that programs, events and activities of a physical nature carry a risk of physical injury and/or death, and that I am assuming this risk. I waive, release and hold harmless the Village of Mackinaw City and its agents, employees, volunteers, officers and council members for any and all claims for damages suffered by me or for injuries I may cause to others as a result of my use of Recreation Center facilities or activities.

By completing this application, I acknowledge and understand the aforementioned policy.

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Return form along with a check made payable to the Village of Mackinaw, 102 S. Huron Avenue, P.O. Box 580, Mackinaw City, MI 49701. Pass will be mailed to you.

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Approved this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, from \_\_\_\_\_,  
Village of Mackinaw City, fee received in the amount of \$\_\_\_\_\_ check no: \_\_\_\_\_,  
receipt number \_\_\_\_\_.