



HASTINGS GOLF CLUB

Winter Pass

Starting in 2021, we are requiring a pass to use our grounds. We are excited to have you here. Our property is privately owned and to ensure safety for all, please adhere.

1. GET A PASS

Season Pass - \$15

Family Pass - \$40

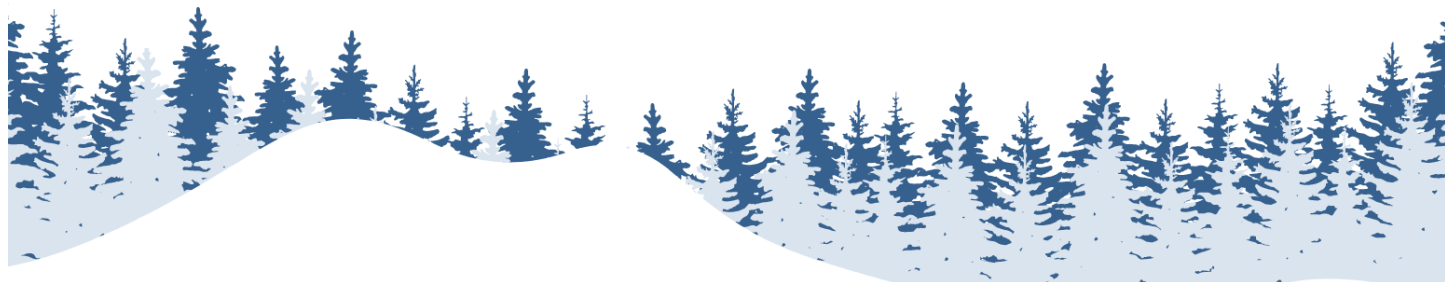
Day Pass - \$5

You must sign a waiver and rules to purchase pass.

2. STAY SAFE & HAVE FUN

Thank you for coming... we'll see you out there!

SNOWSHOES ARE AVAILABLE FOR RENT AT THE CLUBHOUSE DURING BUSINESS HOURS



Application for HGC & HPH Winter Pass

Name _____

Names if Household _____

Address _____

Phone Number _____

I prefer Text

Email Address _____

I have signed and acknowledged the Rules of the pass

I have signed and acknowledged the HGC, HPH, APH Waiver

Staff Signature _____ Date _____

HGC & HPH PASS RULES

Hastings Golf Club and Hastings Public House grounds are privately owned. We truly enjoy having locals and non-locals use our grounds for recreation, but we need to make sure that rules are being followed to ensure safety for all.

1. Pass holder must have their pass visibly on them at all times while using grounds.
(around neck, clipped on jacket, etc).
Lost pass? Purchase a replacement for \$2.

2. Skis and snow shoes must stay on groomed path at all times. This provides safety to our guests and protection of sensitive areas on our golf course.

3. Be respectful to others and the grounds. (Be friendly, discard trash in receptacles, alert staff to issues, etc.)

4. If walking dog(s), please bring a doggie bag and clean up after them. It is the dog owners responsibility, NOT HGC's staff. Leashes are highly encouraged. Please make our staff aware of any issues.

We truly thank you for your patronage and following our rules. If we see pass holders/guests not adhering to these rules, they will have privileges revoked and not be allowed to use our grounds.

I HAVE READ THE ABOVE RULES AND UNDERSTAND I MUST FOLLOW THEM OR PRIVILEGES WILL BE REVOKED.

Signature _____ Date_____

I, _____, HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES LOCATED AT HASTINGS GOLF CLUB, HASTINGS PUBLIC HOUSE, & ALL PRO HOLDINGS PROPERTY, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have3 sufficiently prepared or trained for participation in these activities and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the property/event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions for myself, me executors, administrators, heirs, next of kin, successors, and assigns as follows:

- (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault on the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from these activities, THE FOLLOWING ENTITIES OR PERSONS: _____ and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;
- (B) INDEMNIFY, HOLD HARMLESS, AND PROMISE TO NOT SUE the entities or persons mentioned in this paragraph from all liabilities or claims made as a result of participation in these activities, whether caused by the negligence of release or otherwise. I acknowledge that they are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during these activities.

I understand while participating in these activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OUT OF MY OWN FREE WILL. THIS IS FOR THE ENTIRE WINTER SEASON OF 2021.

PARTICIPANTS SIGNATURE _____ DATE _____

PRINTED NAME _____