



## 2012 Season Pass Application

550 Bunker Lake Blvd NW, Andover MN 55304  
(763) 757-3920

Family Last Name \_\_\_\_\_ Phone (H) (\_\_\_\_) \_\_\_\_\_ Phone (W) (\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 E-mail \_\_\_\_\_

First Name <small>(include last name if different from above)</small>	Date of Birth <small>(or "Adult")</small>	CHECK (Y) THE APPROPRIATE BOX(ES) BELOW			
		Adults & Youth 48" & taller <small>(\$80.00/person)</small>		Youth under 48" tall & Senior Citizens <small>(\$55.00/person)</small>	
1.		\$80.00		\$55.00	
2.		\$80.00		\$55.00	
3.		\$80.00		\$55.00	
4.		\$80.00		\$55.00	
5.		\$80.00		\$55.00	
6.		\$80.00		\$55.00	
		<b>TOTAL</b>		<b>\$</b>	

### Season Pass Policies:

1. Season passes are valid until September 3, 2012 and can be used during all normal business hours.
2. All season pass holders will be issued a tag that will be scanned each time they enter Bunker Beach. Pictures of season pass holders will be taken and kept on file for verification purposes. **A season pass holder's scan tag is required before being allowed to enter the facility. In the event of lost or stolen scan tags, the pass holder must purchase a replacement tag. There will be a \$3.00 replacement fee for those who lose their scan tags.**
3. Season pass holders will be given priority to enter when the facility reaches capacity.
4. Bunker Beach does not refund season passes or allow transfer of privileges to another person.
5. Season passes are to be used only by the authorized user, and any attempts to abuse or misuse the season pass privileges will result in forfeiture of the season pass.
6. By purchasing a season pass, the user agrees to adhere to all Bunker Beach rules and policies.
7. The daily Anoka County Parks entrance fee is NOT included in the price of the season pass. Patrons can either pay the daily fee of \$5.00 per vehicle or purchase an annual vehicle pass for \$25.00. Annual vehicle passes are valid for entrance into *any* Anoka County Park and Washington County Parks.

Participating in activities at the Anoka County Bunker Beach, which activities consist of wave pool, water slide, volleyball and other physical activities can be hazardous. I, for myself, above participants, my spouse, my legal representatives, heirs, and assigns, do hereby release, waive and forever discharge Anoka County, its commissioners, officers, employees and agents from any and all liability, including each and every claim, demand, action or right of action, of whatever kind or nature, either in law or in equity, arising from or by reason of any bodily injury or personal injuries known or unknown, death or property damage resulting to or to result from any accident that may occur as a result of participation in activities at the Anoka County Bunker Beach or any activities in connection with those activities at the Anoka County Bunker beach. **This release does not waive liability for intentional, willful, wanton acts or sole negligence of the County.** I further release Anoka County from any claim whatsoever on account of first aid, treatment or service rendered me or above named participants during my participation in activities at the Anoka County Bunker Beach. I hereby assume full responsibility for the risk of bodily injury, death, or property damage while upon the property of the Anoka County Bunker Beach and while participating in activities at the Anoka County Bunker Beach. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital. I further state that I have read the foregoing release and know the contents thereof and sign this release as my own free act.

\_\_\_\_\_  
 Parent or Participant Signature \_\_\_\_\_  
 Date

PAYMENT INFORMATION (complete this section only if paying by mail or fax)	
<input type="checkbox"/> Cash <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <b>** Checks are not accepted**</b>	
Name on Card: _____	Card #: _____
Signature: _____	Expiration Date: _____

Office use only Transaction # _____	Date Paid _____	Staff Initials _____
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