

# WINTER PARK RECREATION AREA

## Snow Tube Rental Agreement

- **ONE FORM PER FAMILY PLEASE**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ County: \_\_\_\_\_

TELEPHONE NO.: (\_\_\_\_\_) \_\_\_\_\_

I accept for use, as is, the equipment listed on this form, and accept full responsibility for its care while it is in my possession. I agree that there have been no warranties, expressed or implied, which have been made to me which extend beyond the description of the equipment listed on this form. I, the undersigned, acknowledge that I have carefully read this agreement and I understand its contents. I understand that my signature below expressly waives any rights I may have to sue Kewaunee County and the Winter Park Recreation Association for injuries and/or damages.

USER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Number of tickets \_\_\_\_\_