

**AQUATIC EQUIPMENT RENTAL**

**RULES**

- Children under 18 must be accompanied by an adult
- No alcohol allowed
- Should have a proficiency in swimming
- Must only wear coast guard approved floatation devices
- No landing on private property
- No jumping, diving or swimming from the boat
- Must return at designated time or will be charged a \$50 late fee and additional hourly fees
- There are no refunds for any reason
- The participant is responsible for any damage to the boat and equipment rented
- The aquatic staff has the authority to refuse rental
- The boats may not be taken off site and are to be used in Crystal Lake
- If there is thunder or lightning, the participant(s) and boats must return to the beach immediately

**DATES & TIMES**

June 24 – August 9

12:00 pm – 1:00 pm

1:00 pm - 2:00 pm

2:00 pm - 3:00 pm

3:00 pm - 4:00 pm

4:00 pm - 5:00 pm

**FEES**

\$ 5 an hour per boat for residents or \$10 an hour per boat for nonresidents

\*Rentals are on first come, first serve basis.

I have read and agree to the program rules: Participant Initials: X \_\_\_\_\_

Participant Name: \_\_\_\_\_

Rental Date & Time: \_\_\_\_\_

Make of Car: \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ License Plate \_\_\_\_\_

Lake use only:

Green Kayak \_\_ Yellow Kayak\_\_ Canoe\_\_ Life Jacket\_\_

Date and Time Out: \_\_\_\_\_ Time Due In: \_\_\_\_\_ Actual Time Returned: \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_ Employee Initials \_\_\_\_\_

**AQUATIC EQUIPMENT RENTAL**

Middletown Recreation and Community Services Department  
61 Durant Terrace Middletown, CT 06457  
860.638.4500

**Participant:**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Gender: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ or \_\_\_\_-\_\_\_\_-\_\_\_\_ Email: \_\_\_\_\_

**Parent/ Legal Guardian (If under 18):**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Gender: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ or \_\_\_\_-\_\_\_\_-\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_-\_\_\_\_ or \_\_\_\_-\_\_\_\_-\_\_\_\_

**BOAT RENTAL WAIVER:**

I acknowledge and understand the inherent risks associated with boating, canoeing and kayaking, which can result in serious injury, death and drowning. The City of Middletown does not provide supervision of this activity once the user enters the lake; therefore if you do not return at the designated time, the lifeguards will initiate the emergency action plan, which will result in a \$50 fee. USCG approved life jackets are to be worn at all times while in the vessels.

Signature Participant / Parent / Legal Guardian    X \_\_\_\_\_

**MEDICAL RELEASE/PARTICIPANT/PARENTAL PERMISSION:**

In order to participate in Recreation Department Programs, I understand and agree that recreation programs can be physically demanding, but I have the physical ability needed to participate. In the event photos are taken I hereby give permission for the Recreation Department to use said photos in promotional literature, including but not limited to brochures and flyers. In the event of an emergency and the parent/guardian/emergency contact person cannot be reached, I hereby give permission to be transported (or for my child to be transported) to the Middlesex Hospital or any nearby medical facility. It is hereby understood and agreed that I shall assume full financial responsibility for any costs over and above that which is not covered by my health insurance. To the fullest extent permitted by law, I agree to indemnify and hold harmless the City of Middletown and its employees from any injuries or damages caused by or resulting from participation in these programs. **PARENTAL PERMISSION (If under 18 years):** I hereby give permission for my child to participate in Middletown Recreation Department programs. I understand the programs are physically demanding, but I feel my child has the ability needed to participate. **REFUND POLICY:** I understand and agree that no refunds will be given. **RULES:** I have read the program rules on the reverse side of this form and agree as described.

Signature Participant / Parent / Legal Guardian    X \_\_\_\_\_