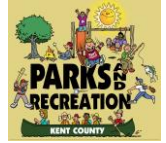




County Commissioners of Kent County, MD

Department of Parks & Recreation



Platform Tennis Policies, Procedures, and Guidelines

Please read this document in its entirety and sign the accompanying release and waiver. All members of your group are required to sign a release and waiver prior to use of the Platform Tennis facility and equipment. Members of your group under the age of 18 must have parental consent for each use of the Platform Tennis facility and equipment, unless parental consent is indicated for a specific coverage period.

General Court Reservations/Fees (Pay Per Play)

In order to reserve a Platform Tennis court or equipment the requestor must be at least 21 years of age and must provide a valid photo I.D. that will be copied and kept on file at Kent County Parks and Recreation (KCPR). A key will be issued to the requestor to access the Platform Tennis facility located at Worton Park. Once the issued key is returned to KCPR, the copy of the photo I.D. will be shredded. Reservations are for a maximum of two hours, beginning at 8:30am and ending by 8:30pm daily.

- Reservations may only be made Monday-Friday between the hours of 8:30am-4:30pm and requires all documentation and payments to be received for all members of a group before the reservation receives final confirmation. Reservations are processed and confirmed on a first come, first served basis, and require a minimum of 72 hours in advance of the reservation time. Full payment in the amount of \$5 per person for a group of four or \$10 per person for a group of two is due at the time of the reservation request. Requests will not be considered final until full payment due, as well as signed Permission, Release, and Waiver is on file for all members of the group. General Reservations will only be issued refunds if unable to play due to inclement weather (rain or excessive snow only, not because of the temperature). One reservation contact must be provided, as he or she will be contacted should there be a need to communicate pertinent information about the reservation. Please call the Recreation Program Coordinator at 410-778-1957 or email info@KentParksAndRec.org to make a reservation or for general inquiries.
- The Platform Tennis facility is equipped with lights for evening play outside of Day Light Savings months (November-March). There will be an additional \$50 fee assessed per reservation to use the lights. Additionally, a separate key will be issued to the requestor to unlock the light box at the beginning of the reservation to turn on the lights and to lock the light box after turning off the lights at the end of the reservation. **Please note light use will be strictly monitored for additional use outside of the two-hour maximum reservation period.**
- Keys issued must be returned immediately following the reservation. If the Community Center is closed, keys must be returned to the "Key Drop Box" located outside the main entrance of the Community Center. **Failure to return keys or if there is damage to keys, the user will be held responsible for the full replacement costs of the locks and keys.**

It is the goal of KCPR to ensure that everyone is well served and has a positive experience. Please direct questions, concerns, or suggestions to the Recreation Program Coordinator (410-778-1957 or email info@KentParksAndRec.org).

Annual Membership Reservations/Fees

Individuals who wish to purchase an annual membership (November - October) may do so at a cost of \$100.00 per person in county and \$120.00 per person out of county.*The annual membership includes (2), two hour reservations per week for up to 52 weeks. All members must make payment and sign the Permission, Release, and Waiver to guarantee a reservation for a group. Although the Platform Tennis season officially begins November 1, member reservations may be reserved beginning July 1 each year for the upcoming season (November-October). Refunds will not be issued for "No Play" periods or unused or cancelled reservation time for Annual Membership Reservations. One reservation contact must be provided, as he or she will be contacted should there be a need to communicate pertinent information about the reservation, including the court access codes. Please contact the Recreation Program Coordinator (410-778-1957 or email info@KentParksAndRec.org) to make a reservation or for general inquiries.

**Additional Membership Benefit: If there is an open time slot that has not been reserved on the reservation board located at the courts, members may play a third day and time in a week, in the open time slot, without making an additional reservation. Please keep in mind that this is "show up at your own risk."*

Membership Fee Payment Schedule/Pro-Rated Fee Schedule

** Early Bird Online Special \$85.00 (Resident) or \$105.00 (Non-Resident) Pay Oct.

\$100.00 if paid Nov.-Dec. (Resident) or \$120.00 (Non-Resident)* \$85 if paid Jan.-Feb. (Resident) or \$105 (Non-Resident)

\$70 if paid Mar.-Apr. (Resident) or \$90 (Non-Resident) \$55 if paid May-June (Resident) or \$75 (Non-Resident)

Courtesy to Others

- In the spirit of being courteous and considerate of others, please **promptly exit** the Platform Tennis facility when your time has expired. Example: A 6:30pm ending time means that you are **exiting** the facility at 6:30pm. Please incorporate any necessary "cool down" time into your reservation.
- Be courteous to staff at KCPR and to other players who use the facility before and after your reservation. If you have any concerns or problems, please contact the Recreation Program Coordinator (410-778-1957 or email info@KentParksAndRec.org) at your earliest convenience so that we can make every attempt to resolve issues as quickly as possible.

(Continued on Back)

Equipment Rental/Fees

KCPR has limited equipment for use upon request for individuals who do not have their own equipment.

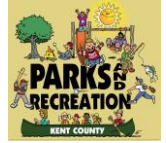
1. In order to reserve Platform Tennis equipment, the requestor must be at least 21 years of age.
2. An equipment rental agreement must be signed by the Requestor. The Requestor is responsible for all equipment issued. If equipment is rented for a group, the equipment may be rented per individual (requires separate rental agreement per person) or per group (requires one rental agreement signed by the Requestor).
3. Requestor must provide a valid photo I.D. that will be copied and kept on file at KCPR. The copy of the photo I.D. will be shredded once the rented equipment is returned to KCPR. If equipment is returned after hours, the copy of the photo I.D. will be shredded upon confirmation the equipment was returned and in good condition.
4. *Rental Packages are as follows:
 - a. **Uno**: Includes (1) one paddle and (1) ball: \$10
 - b. **Double It Up**: Includes (2) two paddles and (1) ball: \$20
 - c. **Fun Four All**: Includes (4) four paddles and (1) one ball: \$30
5. Equipment issued must be returned immediately following the reservation. If the Community Center is closed, equipment must be returned to the "Equipment Drop Box" located outside the main entrance of the Community Center.

The Community Center's hours are 8:30am-6pm, Monday-Saturday, May 1-October 31 and 8:30am-9:30pm, Monday-Friday and 8:30am-6pm, Saturday, November 1-April 30.



County Commissioners of Kent County, MD

Department of Parks & Recreation



Platform Tennis Reservation Request Form

Select Type of Reservation: ___ General (Pay Per Play) ___ Annual Membership (Up to 52 Weeks: November-October)

Please **select two 1st, 2nd, and 3rd preferred court reservation days and times** below. Requests will be processed and confirmed on a first come, first served basis after all members of the group have signed the Platform Tennis Permission, Release, and Waiver, as well as have made full payment per the payment options below. Refunds will not be issued for "No Play" periods or unused or cancelled reservation time for Annual Membership Reservations. General Reservations will only be issued refunds if unable to play due to inclement weather (rain or excessive snow only). One reservation contact must be provided, as he or she will be contacted should there be a need to communicate pertinent information about the reservation. Please contact the Recreation Program Coordinator (410-778-1957 or email info@KentParksAndRec.org) with questions about making a reservation or general questions.

Group Contact First and *Last Name (please print clearly): _____

**Group contact last name and first initial will be recorded on Reservation Board. Please ensure members of your group are aware of your group's reservation name.*

**Group contact will be provided court access code for entry to courts. Access codes are changed periodically and will be communicated to Group contact.*

Mailing Address: _____

Telephone: _____ **Email:** _____

To encourage and allow for maximum utilization of courts, if you know that your group will not play during certain periods/months throughout the year, please indicate "No Play Period(s)" here (if applicable): _____

No Play Period(s) Examples: May-September=reserved time will not include the months of May to September; April-May=reserved time will not include the months of April to May

COURT 1	8:30-10:30a	10:30a-12:30p	12:30-2:30p	2:30-4:30p	4:30-6:30p	6:30-8:30p
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
COURT 2	8:30-10:30a	10:30a-12:30p	12:30-2:30p	2:30-4:30p	4:30-6:30p	6:30-8:30p
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

*****For Informational Purposes Only*****

Payment Types:	Pay Per Play \$5 /Person Group of 4	Pay Per Play \$10/Person Group of 2	*Annual Membership Rates/Payment Schedule Below Maximum Group of 12		
**Annual Membership Rates/Pay Schedule:	Early Bird Online Special – Resident \$85/ Non-Resident - \$105 Pay October	\$100/\$120 Pay Nov-Dec	\$85/\$105 Pay Jan-Feb	\$70/\$90 Pay Mar-Apr	\$55/\$75 Pay May-June

**11041 Worton Road * P.O. Box 67 * Worton, MD 21678 * 410-778-1948 * info@KentParksAndRec.org
KentParksAndRec.org * [Facebook.com/KentCountyCommunityCenter](https://www.facebook.com/KentCountyCommunityCenter)**



County Commissioners of Kent County, MD

Department of Parks & Recreation



~ALL PARTICIPANTS REQUIRED TO SIGN PERMISSION, RELEASE & WAIVER CONSENTS ANNUALLY~

Platform Tennis Permission, Release, and Waiver

The undersigned individual (hereinafter sometimes referred to as "User"), agrees to indemnify and hold harmless the County Commissioners of Kent County, a body corporate and politic and a political subdivision of the State of Maryland (the "County"), including therein its elected and appointed officials, employees, agents, and volunteers and others working on its behalf, from and against all loss, cost, expense, damage, liability or claims, of any kind or nature whatsoever, arising out of the bodily injury, sickness or disease (including death resulting at any time there from) which may be sustained or claimed by any person or persons, or the damage or destruction of any property, including the loss of use thereof, arising from or out of, or relating to any act or omission, negligent or otherwise of the User (including any persons using the subject facilities with the consent or permission thereof), or anyone acting on his, her, or its behalf, in connection with or incidental to the use of the Platform Tennis facility and related facilities owned or maintained by the County or except that the User shall not be responsible or liable to the County for damages caused by or resulting from the County's sole negligence; and the User shall, at its own cost and expense, defend any such claims and any suit, action, or proceeding which may be commenced there under, and the User shall pay any and all judgments which may be recovered in any suit, action or proceeding, and any and all expense including, but not limited to, costs, attorney's fees and settlement expenses, which may be incurred with respect thereto.

Platform Tennis Courts Cleaning

During the fall season, when the leaves and pine needles are falling, DPW will blow off the leaves and pine needles once per week. Snow removal and/or removal of leaves and pine needles in between the once per week blowing off by DPW will be the responsibility of the participants. By signing below, I understand that outside of the aforementioned schedule by DPW, cleaning of the courts shall be the responsibility of participants.

Photo/Video Image Use Consent and Release

Participation in or attendance at recreation programs/facilities or events sponsored, owned, or maintained by the County constitutes voluntary consent of the user to: (a) be photographed, filmed, or videotaped by a County representative and (b) the reproduction and use of all such photographs, digital images, films and likenesses for publicity purposes in publications, brochures, advertisements, promotional and marketing materials and all other media venues including the World Wide Web, all without further notice or compensation to user who hereby releases to the County all proprietary rights and copyrights in all such photographs, digital images, films and likenesses (including negative, positives and prints) which shall be and remain the property of the County. I have read, understand, and agree to the above photo/video image consent and release, unless noted otherwise with signature below.

*If player is under the age of 18, parental consent is required for each use. Parental consent may be submitted via handwritten notification with date permitted to participate, parent name and signature, and player/child's name if not present at the time of minor player/child's use.

PRINT PLAYER FIRST & LAST NAME AND *EMAIL *If player is under 18, Child Name/Parent Name	SIGNATURE / DATE *If player is under 18, Parent's Signature Only	**STAFF USE ONL PLEASE** PAYMENT INFO Date PD, Amount, Cash or Ck #	Staff Initials
Tommy Bahama tommybahama@gmail.com			

***Please provide your email to receive info specific to Platform Tennis before each season and only as needed for special announcements.**

~ Please make payments payable to County Commissioners of Kent County ~

*******Staff Use Only*******

Payment Due: ___\$5/Person ___\$10/Person ___*Annual Membership Rates/Payment Schedule Below ___/___/___ Date Full Payment & Waiver Signed
Group of 4 Group of 2 Maximum Group of 12 (For All Members of Group Above)

**Annual Membership Rates/Pay Schedule: <div style="border: 2px dashed black; padding: 5px; display: inline-block;"> Early Bird Online Special – Resident - \$85/ Non-Resident - \$105 Pay July-October </div>	\$100/\$120 Pay Nov-Dec	\$85/\$105 Pay Jan-Feb	\$70/\$90 Pay Mar-Apr	\$55/\$75 Pay May-June
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KentParksAndRec.org * [Facebook.com/KentCountyCommunityCenter](https://www.facebook.com/KentCountyCommunityCenter)**



County Commissioner of Kent County, MD

Department of Parks & Recreation



ACKNOWLEDGMENT OF RISK AND WAIVER OF LIABILITY RELATING TO CORONAVIRUS/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing to prevent the spread of Coronavirus/COVID-19. Contracting Coronavirus/COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Kent County Parks and Recreation (KCPR) has established and implemented new protocols and put in place preventative measures to help reduce the spread of COVID-19; however, KCPR cannot guarantee that participants of programs or activities, attendees, contractors, employees or others will not become infected with COVID-19. Participating in or attending any recreation program or activity, whether indoors or outdoors may increase the risk of contracting COVID-19.

I hereby confirm that I (or my minor child/children) do not have an elevated temperature or otherwise exhibit any symptoms of COVID-19, am in good health and able to participate. I understand and confirm that should I (or my minor child/children) have an elevated temperature or otherwise exhibit symptoms of COVID-19, am not in good health or unable to participate when the program or activity is scheduled to begin, that I (or my minor child/children) will refrain from participating in or attending the program or activity.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and knowingly and voluntarily assume the risks that I (or my minor child/children) may be exposed to, or infected by COVID-19 by participating in or attending Kent County Parks and Recreation (KCPR) programs or activities, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risks of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others.

I knowingly and voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (or my child/children) including, but not limited to, personal injury, illness, permanent disability, and death, damage, loss, claim, liability, or expense, of any kind, that I (or my minor child/children) may experience or incur in connection with my (or my minor child's/children's) participation in or attendance at a KCPR program or activity. On my behalf (or on behalf of my minor child/children), I hereby release, covenant not to sue, discharge, and hold harmless Kent County, Maryland, Advisory Board Members, and their respective elected/appointed officials, employees, agents, representatives, successors and assigns of and from any claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of Kent County, Maryland, Advisory Board Members, and their respective elected/appointed officials, employees, agents, representatives, successors and assigns after participation in or attendance at any KCPR program or activity.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE AND WAIVER OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Printed Name of Participant/Attendee

FAC # (STAFF USE ONLY)

Full Mailing Address (Street Name and Number of PO Box) City State Zip Code

Printed Name of Parent/Guardian of Minor Participant/Attendee

Signature of Participant/Parent/Guardian of Minor Participant Date