

Guest Last Name		Guest First Name	
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Sponsor's Information

*** Required Fields**

* First Name _____ *Last Name _____

*Home Address _____

*City _____ *State _____ *Home Phone _____

*Email Address _____

*Unit _____ *Unit/Work Phone _____

*Sponsor Status (circle one)

Active Duty Mil National Guard Reservist Retired Mil DOD Civilian DOD Contractor Other

*Rank/Grade _____ Branch of Service _____

*Gender Male Female

*Sponsor Date of Birth _____ Last 4 of SSN _____

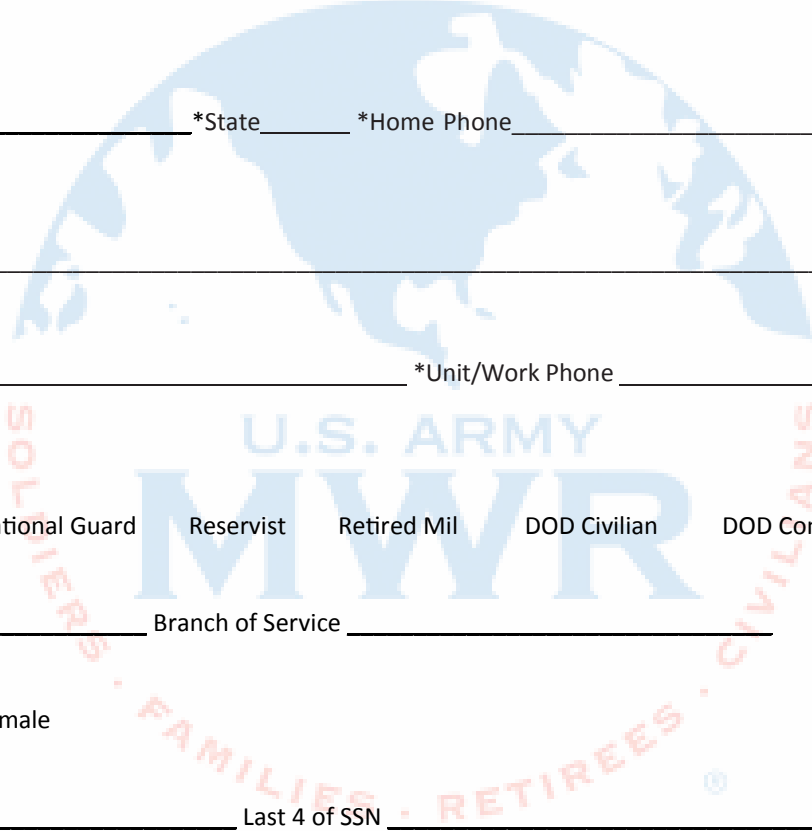
Guest Information

*First Name _____ *Last Name _____

*Home Address _____

*City _____ *State _____ Home Phone _____

*Email Address _____



Guest Last Name		Guest First Name	
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Guest Policy

In accordance with the AR 215-1, dated 15 August 2005, and the Fitness Centers Standing Operation Procedures, facility Policies and Procedures, authorized patrons (Active Duty, Retirees, and Reserve military and their family, DOD Civilians) who wish to have guests in Installation physical fitness centers will adhere to the following policy. Sponsors are responsible for the conduct of their guests at all times while in the facility. Guests and sponsor must enter and depart the facility at the same time. DOD Civilians are authorized to bring their immediate family members as guests an unlimited number of times per month. Immediate family members are defined as a spouse or child under the age of 22. Spouse or child must bring a form of identification so staff can verify family member. Card holder is responsible for their family member and must remain in the facility with that person. Guests are intended to be occasional users of the facility only. Occasional users are defined as guests who utilize the facility no more than four times in a one month period. All authorized patrons wishing to bring a guest must possess a valid military ID card. All guests must show a valid picture ID. Active Duty military, Retirees, and Reserve military and their family members who are 18 years of age or older may have no more than two (2) guests per visits. **ONLY APPROVED GUESTS ARE PERMITTED FACILITY PRIVILEGES.** Sponsor and guest will complete the guest sign in sheet upon each entry to the facility with the guest and sponsor will sign out prior to exiting the facility with the guest. Failure to sign out prior to exiting the facility with the guest will result in the loss of guest privileges for that sponsor. Exceptions to the above policy may be made only by the Facility Manager.

Rights Waiver

I, _____ (the Guest), agree to indemnify and hold harmless the Directorate of Morale, Welfare, and Recreation, the Fort Carson Sports & Fitness Centers to include their principals, agents, employees and volunteers, of and from any and all claims, demands, losses, causes of action, damage, lawsuits, judgments, including attorneys' fees and costs, arising out of or relating to any injury, death or property damage caused by my negligence, intentional act or omission, while using the facilities and equipment or while participating in the activities offered by the Fort Carson Sports & Fitness Centers. I understand this includes all areas within and adjacent to the facility, parking lots, playgrounds, parks, recreational areas and other areas selected for training by the Fort Carson Sports & Fitness Centers. I have **read** and **understood** the foregoing assumption of risk and release of liability and I understand that by signing it obligates me to indemnify the party named for any liability for injury or death of any person and damage to property caused by my negligent or intentional act or omission. I understand that by **signing** this form I am **waiving** valuable legal rights.

I have read and understand the release of liability contained within this agreement. I understand my signature will bind me to indemnify the above-mentioned parties for any liability arising out of or relating to any injury, death or property damage caused by my negligence, intentional act or omission. I understand that by signing this form, I am waiving valuable legal rights.

Sponsor

Print Last Name	Print First Name
Signature	Date

Guest

Print Last Name	Print First Name
Signature	Date

Time In:	Staff Initial:	Time Out:	Staff Initial:
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2nd visit	Date	Time in	Time out	Staff initial	Sponsor Signature
3rd visit	Date	Time in	Time out	Staff initial	Sponsor Signature
4th visit	Date	Time in	Time out	Staff initial	Sponsor Signature

***AUTHORITY:** Public Law 101-189, Section 1504; E.O. 9397. **PRINCIPAL PURPOSE:** To collect sponsor and guest data to determine eligibility and monitor use in DFMWR facilities and services. **ROUTINE USES:** The DoD "Blanket Routine Uses" that appear at the beginning of the Army's compilation of systems of records apply to this system. These records or information may be disclosed to the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) to the Department of the Treasury, Financial Management Service, for the purpose of collecting delinquent debts owed to the U.S. Government. **DISCLOSURE:** Disclosure of information is voluntary; however, failure to provide the information requested may result in the individual not being permitted to use DFMWR facilities or services.

5	Date	Time in	Time out	Staff initial	Sponsor Signature
6	Date	Time in	Time out	Staff initial	Sponsor Signature
7	Date	Time in	Time out	Staff initial	Sponsor Signature
8	Date	Time in	Time out	Staff initial	Sponsor Signature
9	Date	Time in	Time out	Staff initial	Sponsor Signature
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24	Date	Time in	Time out	Staff initial	Sponsor Signature
25	Date	Time in	Time out	Staff initial	Sponsor Signature