



Temporary Resident Application



Stapleton Address			
Primary Homeowner			
Last Name		First Name	
Email Address		Phone	
Temporary Resident Information			
Last Name	First Name	DOB	Age
Email Address		Phone	

Supporting Documentation <i>(Include copy of passport or Valid ID)</i>
<input type="checkbox"/> Au Pair Contract with Stapleton Address
<input type="checkbox"/> Bank Statement with Stapleton Address
<input type="checkbox"/> Credit Card Statement with Stapleton Address
<input type="checkbox"/> Cell Phone Statement with Stapleton Address

Emergency Contact	
Name	Phone

Waiver and Release

In agreeing to participate in recreation and fitness activities at Stapleton, I agree as follow: I fully understand and acknowledge that recreational and fitness activities have a)inherent risks, dangers and hazards and such exists in my use of any equipment and my participation in these activities; b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that, could cause serious disability; c) these risk and dangers may be caused by the negligence of the representatives, employees, or volunteers of the Stapleton MCA, the negligence of the participants, the negligence of others, accidents, breaches of contract, or other causes; d) by my participation in these activities and for use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages whether caused in whole or in part by the negligence or the conduct of the representatives, employees or volunteers of the Stapleton MCA, or by any other person.

I, on the behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify the Stapleton MCA and its representatives, employees and volunteers from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of any equipment or participation in these activities. I specifically understand that I am releasing, discharging, and waiving any claims or actions that I may have presently or in the future for negligent acts or other conduct by the representatives, employees and volunteers of the Stapleton MCA.

I have read the above waiver and release and by signing it agree. It is my intention to exempt and relieve Stapleton MCA from liability for personal injury, property damage or wrongful death caused by negligence or any other cause.

Applicant Signature _____ Date _____