

# Freedom Pass

2019

City of Mississauga  
Community Services Department  
Recreation Division  
5600 Rose Cherry Place  
Mississauga ON L4Z 4B6  
Tel. 905-615-4100  
www.mississauga.ca/freedompass



Personal information on this form is collected under the authority of City of Mississauga Transit By-law 425-03. It will be used by the City of Mississauga to administer individual consent for the MiWay Freedom Pass. Questions about the collection of this personal information should be directed to: Manager, Customer Services Centre, Community Services Department, 5600 Rose Cherry Place, Mississauga ON L4Z 4B6, Telephone 905-615-4100.

## Freedom Pass Conditions of Use

- Freedom Pass applicants date of birth July 2, 2005 to December 31, 2007
- Applications can be dropped off at any City owned community centre (see list below)
- Applicants must provide one piece of identification to verify their year of birth and have their photograph taken to produce the pass
- Applications will be accepted starting May 1, 2019 until August 31, 2019
- Loss of card is to be reported immediately. A replacement fee will be charged for replacing lost cards
- Freedom Pass is valid from July 1, 2019 to August 31, 2019
- Freedom Pass is good for free unlimited MiWay transit use on MiWay routes and free public swims at City operated pools
- Freedom Passes are not transferable and may be confiscated by Transit Authority if used fraudulently or reproduced illegally
- Freedom Pass must be clearly displayed to transit employees at time of use and shall be surrendered for inspection upon request
- Freedom Pass is for Mississauga residents only
- To gain admittance to any Pool, use the card scanners or present card to staff. All Pool safety and admission guidelines are in effect (see staff for details)
- All facility rules and regulations are required to be followed. Failure to do so may result in suspension of pass or admittance privileges

## Student Information (the "Participant")

Name (Last / First)

Date of Birth (Year / Month / Day)

## Parent/Guardian Information

Email Address

- New Customer  
 Updating Existing Information

Parent/Guardian Name (Last / First)

Address (Number, Street, Suite)

City

Province

Postal Code

Phone (Home)

Phone (Cell)

# Assumption of Risk and Waiver

## Health Declaration

I, the undersigned, hereby certify that I have no knowledge of any physical disability of the participant I register for which would make the participation in the Community Centre programs under the Pass hazardous to the participant's health. (Otherwise, medical certificate MUST be submitted.)

## Assumption of Risk

I understand that certain risks of injury may occur while participating in the Community Centre programs including not limited to all sports, recreational activities, programs and services, such as muscle stiffness, sprains, strains, nausea, light headedness, chest pain and other health risks. I understand that certain recreational activities require a minimum level of fitness and health (physical, emotional and mental) and that all individuals vary in their capacity to participate. Therefore, I consider the participant physically able to participate and I hereby freely accept and fully assume all such risks, dangers and hazards and the possibility of personal injury, death, property or other

loss resulting from the participation of the Community Centre programs under the Pass.

## Medical Authorization

On behalf of the participant I register for whom in law I am responsible for, I hereby give permission to have the City of Mississauga, its Mayor, councilors, officers, employees, volunteers (collectively hereinafter the "Released Parties") administer or arrange for any emergency medical care including hospitalization/transportation, if necessary, and I hereby consent on behalf of myself and the participant I register to the administration of such emergency medical treatment as may be deemed necessary in the circumstances. I acknowledge and agree to pay all costs associated with medical care, treatment and transportation.

## Waiver of Liability

In consideration of being granted permission to participate in the program, I hereby for myself, my heirs, executors, administrators, or any others

who may claim on my behalf, covenant not to sue, and hereby waive, release and discharge the City and/or any of the Released Parties from any and all losses, liabilities, damages, actions, suits, claims, demands (collectively hereinafter the "Claims"), whether direct or indirect for personal injury, illness, loss of life or property damage of any kind or nature, arising from or in any way related to this registration and/or to the participant's participation of the programs under the Freedom Pass. I further agree to fully indemnify, hold harmless and defend the City and/or any of the Released Parties from and against any and all Claims brought against the City and/or any of the Released Parties including all related costs and expenses and against any loss, costs, damages or expenses which the City and/or any of the Released Parties may sustain, suffer, incur or be liable for resulting from, arising from or in any way related to this registration and/or to the participant's participation of the programs under the Freedom Pass.

## Parent/Guardian Consent for Minors

- I am the parent or legally appointed guardian of the person named as Participant at the beginning of this form who is under the age of 18 years old and I have the legal authority to represent and bind that person.
- By providing my email to the City, I further consent to receive communications from the City of Mississauga relating to the Freedom Pass programs.
- I have read this form and understand and voluntarily agree to be bound by its contents including the conditions of use, Health Declaration, Assumption of Risk, Medical Authorization, Waiver of Liability, and provide the requisite consent for the City to use the photograph for the Freedom Pass.

Signature of Parent/Legal Guardian	Date (Year / Month / Day)
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**Freedom Passes** issued at the following Community Centers (CC):

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|---|---|--|
| <ul style="list-style-type: none"> <li>• <b>Burnhamthorpe CC</b><br/>1500 Gulleden Dr.<br/>905-615-4630 x 2500</li> </ul>     | <ul style="list-style-type: none"> <li>• <b>Frank MacKechnie CC</b><br/>310 Bristol Road E.<br/>905-615-4660 x 2220</li> </ul>        | <ul style="list-style-type: none"> <li>• <b>Meadowvale CC</b><br/>6655 Glen Erin Dr.<br/>905-615-4710 x2555</li> </ul>                     |
| <ul style="list-style-type: none"> <li>• <b>Carmen Corbasson CC</b><br/>1399 Cawthra Rd.<br/>905-615-4800 x 2660</li> </ul>   | <ul style="list-style-type: none"> <li>• <b>Mississauga Sports Zone</b><br/>5600 Rose Cherry Place<br/>905-615-3200 x 2895</li> </ul> | <ul style="list-style-type: none"> <li>• <b>Mississauga Valley CC</b><br/>1275 Mississauga Valley Blvd.<br/>905-615-4670 x 2470</li> </ul> |
| <ul style="list-style-type: none"> <li>• <b>Clarkson CC</b><br/>2475 Truscott Dr.<br/>905-615-4840 x 2120</li> </ul>          | <ul style="list-style-type: none"> <li>• <b>Huron Park Recreation Centre</b><br/>830 Paisley Blvd.<br/>905-615-4820 x2440</li> </ul>  | <ul style="list-style-type: none"> <li>• <b>South Common CC</b><br/>2233 South Millway<br/>905-615-4770 x 2265</li> </ul>                  |
| <ul style="list-style-type: none"> <li>• <b>Erin Meadows CC</b><br/>2800 Erin Centre Blvd.<br/>905-615-4750 x 2065</li> </ul> | <ul style="list-style-type: none"> <li>• <b>Malton CC</b><br/>3540 Morningstar Dr.<br/>905-615-4640 x 2510</li> </ul>                 | <ul style="list-style-type: none"> <li>• <b>River Grove CC</b><br/>5800 River Grove Ave.<br/>905-615-4780 x 2300</li> </ul>                |

**Office Use Only**

Proof of age provided   
  Freedom Pass card issued to student   
  Entered into Class   
 \_\_\_\_\_ Customer Service employee initials