

Pine Grove Area Community Swimming Pool
SEASON PASS APPLICATION



LAP PASS - \$ 20.00

APPLICANT NAME

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Email _____

Home Phone _____ **Cell Phone** _____

DOB _____

EMERGENCY CONTACTS

Name _____ **Phone** _____

Name _____ **Phone** _____

TERMS OF AGREEMENT

I understand that this pass is only good for lap swim hours, and cannot be used for admission to the pool during regular hours. Only lap pass holders will be admitted to the pool during lap swim hours. Pass-holders must be 16 years of age or older.

I agree to abide by all rules and regulations set forth by the Pine Grove Borough Recreation Board. Failure to follow rules and regulations may result in a loss of privileges and suspension of the season pass without refund.

Applicant Signature _____ **Date** _____

FOR OFFICE USE ONLY

DATE RECEIVED	EMPLOYEE	SEASON PASS #	PAYMENT METHOD

Season Pass Cards will be available for pickup at the pool beginning on opening day