2016

LOUDONVILLE SWIMMING POOL
MEMBERSHIP APPLICATION

Information of person purchasing pass:

1. Name _____ _____
Last **First** **Male or Female**

Address _____ _____
Street Address **Age**

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

_____
Phone Number

Emergency Contact (in the event that the person listed above can not be reached)

_____ _____
First and Last Name **Phone Number**

Additional Pass Holders

	Name	**Age**	**Male/Female**	**Relation**
2.				
3.				
4.				

Additional Family Members – Add $25.00 each

1. _____

2. _____

3. _____

	Village Resident OR Village Income Taxpayer	**Non-Resident and NOT a Village Income Taxpayer**
Household Membership	**$135**	**$150**
Individual (Ages 18-59)	**$ 80**	**$ 90**
Youth (6-17)	**$ 70**	**$ 80**
Senior (Ages 60 and over)	**$ 40**	**$ 40**

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FOR OFFICE USE ONLY

Name of person selling pass _____ Date Sold _____
Amount Paid _____
Method of Payment _____ Cash _____ Check Number _____
Pass Number _____ Date card(s) issued _____