

**LOUDONVILLE SWIMMING POOL
MEMBERSHIP APPLICATION
2017**

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

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 _____