

# SEASON PASS APPLICATION

## INDIVIDUAL - \$85



### APPLICANT NAME

Name \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

### PARENTS (if Applicant under 18)

Name \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

Name \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

### ADDRESS

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_

### EMERGENCY CONTACTS

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

### TERMS OF AGREEMENT

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 (Parent) 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*