

Pine Grove Area Community Swimming Pool  
**SEASON PASS APPLICATION**  
**SENIOR COUPLE - \$100**



**APPLICANT NAME**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

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

**Email** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**DOB** \_\_\_\_\_

**SPOUSE**

**Name** \_\_\_\_\_

**Email** \_\_\_\_\_

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

**DOB** \_\_\_\_\_

**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 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*