# 2024 LOYALSOCK COMMUNITY SWIMMING POOL PASS APPLICATION

### \*\*\* POOL PASS RULES \*\*\*

### ALL APPLICATIONS MUST BE SUBMITTED TO THE LOYALSOCK TOWNSHIP RECREATION OFFICE. 1607 Four Mile Drive, Williamsport, Pa 17701 YOU MUST PICK UP YOUR POOL PASSES AT THE RECREATION OFFICE PRIOR TO GOING TO THE POOL. PASSES WILL NOT BE AVAILABLE AT THE POOL OR TOWNSHIP OFFICE.

<u>Public Swim Dates</u>: May 25<sup>th</sup>, 26<sup>th</sup>, 27<sup>th</sup> – June 1<sup>st</sup> & June 2nd – June 8th & 9<sup>th</sup> - Open full time on June 14<sup>th</sup> at noon. <u>Public Swim Hours</u>: *Monday* - *Thursday* 1:00 - 7:45 p.m. *Friday* - *Sunday* 1:00 - 6:45 p.m. Senior & Adult Lap Swim: Daily Noon - 1:00 p.m.

## POOL MANAGEMENT RESERVES THE RIGHT TO CHANGE LIMIT ADMISSION, HOURS OF OPERATION OR TO CLOSE THE POOL FOR WEATHER, ATTENDANCE, OR OTHER SAFETY CONCERNS <u>WITHOUT NOTICE</u>.

Smoking is no longer allowed in the pool complex or directly outside pool entrance.

# **MEMBERSHIPS**

- *FAMILY* includes only dependents living in the <u>same</u> household and claimed on <u>one</u> federal income tax form. If there is any question about this, you may be required to show proof before any passes are issued.
- **CHARTER** includes those who joined the pool, donated to its inception, and have maintained a yearly membership to date.
- SENIOR CITIZEN (10% DISCOUNT) includes anyone age 65 or older. If applying for a Family Membership, all above conditions must be met. No discounts will be given after purchase has been made.

Please **CHECK** appropriate boxes and **COMPLETE** information on reverse side. Passes are **NOT** transferable. **SIGN** at "Release & Acknowledgment" and "Signature" lines on reverse side.

### **RETURN** entire form with your payment to:

#### LOYALSOCK TOWNSHIP RECREATION DEPARTMENT 1607 FOUR MILE DRIVE, WILLIAMSPORT, PA 17701 (also shock or money order poughle to LOYALSOCK TOWNSHIP

Make check or money order payable to LOYALSOCK TOWNSHIP

	Pric	es <u>Until</u> May 3 <sup>rd</sup>	, 2024 (NO Exception	ns) Prices <u>Aft</u>	<u>er</u> May 3rd, 2024				
Pass '	Гуре	□ Resident	Non-Resident	□ Resident	□ Non-Resident				
FAMILY									
	Seasonal	\$180.00	\$240.00	\$190.00	\$250.00				
	Charter	Free		Free					
	Monthly	\$105.00	\$150.00	\$115.00	\$160.00				
INDIVIDUAL									
	Seasonal	\$120.00	\$165.00	\$130.00	\$175.00				
	Charter	Free		Free					
	Monthly	\$90.00	\$120.00	\$100.00	\$130.00				

 $\Box$  Please Check here for Senior Citizen Discount of 10%.

□ Check here if there is any medical information which would facilitate emergency treatment for the holder of this pass. **Please attach a note to this form with all necessary information.** 

Resident Daily Admission - \$6.00 per person ages 12 & up, \$5.00 per person ages 2 to 11, <u>under</u> 2 free. Non-Resident Daily Admission - \$8.00 per person ages 12 & up. \$7.00 per person ages 2 to 11, <u>under</u> 2 free Non-Swimmer - \$3.00 Resident and Non-Resident (must receive special wristband)

# (PLEASE COMPLETE REVERSE SIDE)

**PLEASE PRINT**: Name(s) of person(s) requesting pass. Information is used in case of emergency & <u>must</u> be completed to receive pass.

NAME			AGE	SEX	
l					
2					
3					
4					
-					
)					
ADDRESS:	Street/P.O. Box/Apt #	City	S	tate	Zip
	(Work)		(Home)		
	RELEASE AND ACK	NOWI EDOMENT			
т	in consideration of bein			sponsorad by	the Township of
Loyalsock and/or its Renyself and my property he decision of any office activities; 4. That I sh responsibility and risks natural and manmade con- activities; 6. That I conso 7. That I have read, to representations, statem AGREE TO INDEMNI oss, liability, damage of Board, or in any way	in constant tion of both ecreation Board, am aware of, acknowledge and y; 2. That I am medically able, equipped and prop cial or representative of Loyalsock Township and all abide by all rules and regulations for the a associated with such activities, including but not onditions; e. all other risks and hazards encounte sent for myself, and for my child above, to receive understood and voluntarily signed this Release tents or other inducements have been made to m IFY, RELEASE, DISCHARGE AND HOLD HA or cost that may arise from my presence on, or competing, officiating, observing, working for, k Township and/or its Recreation Board or otherw	agree to the followin berly trained to parti- d/or its Recreation B activities in which 1 limited to: a. falls; red while participati e immediate, emerge and Acknowledgn e other than those c .RMLESS Loyalsoc my use of, property or for any purpose	ng: 1. That such a cipate in such actionard relating to magnification of a participating b. contact with ot ng, observing and and nent and agree to contained in this were to contain the contained in t	ctivities can r ivities; 3. That iy ability to pa g; 5. That I a her participan l/or traveling to medical treatm o its terms, a vritten docume or its Recreatio ownship and/o	esult in injury to t I shall abide by articipate in such am assuming all its; c. weather; d. to and from such nent if necessary; and that no oral ent. I HEARBY on Board for any or its Recreation
Signature			Date		
Parent's Signature_	(If under 18 years of age)		Date		
	(If under 18 years of age)				
Office Use Only					

Date Paid	Check#	Receipt#	Amount Paid	Initials
Pass Number(s)				