

2019 Pool Membership Application

Office Use Only

Issue Date: _____

Issued by: _____

City of Piqua
Parks & Recreation (937)778-2085

Municipal Pool (937) 778-7665

Adult or Parent/Guardian: _____

Address: _____

City, State, Zip: _____

Home Phone Number: _____ Emergency Number: _____

Email Address: _____

NAMES ON PASSES

<u>FIRST NAME</u>	<u>LAST NAME</u>	<u>AGE</u>	<u>RELATIONSHIP</u>	<u>PASS NUMBER</u>

ONLY FAMILY MEMBERS LIVING IN THE ABOVE ADDRESS QUALIFY FOR THE FAMILY MEMBERSHIP

- _____ FAMILY OF TWO \$100.00
- _____ ADDITIONAL FAMILY BEYOND TWO IN THE SAME HOUSEHOLD – TOTAL _____ \$20.00 EACH
- _____ SINGLE ADULT \$65.00
- _____ STUDENT (1st-12 Grade as of Memorial Day) \$40.00
- _____ PRESCHOOL THROUGH KINDERGARTEN \$20.00
- _____ SENIOR CITIZEN (62 Years or older as of Memorial Day) \$40.00
- _____ SENIOR CITIZEN COUPLE (62 Years or older as of Memorial Day) \$65.00

TOTAL AMOUNT \$ _____

MAKE CHECKS PAYABLE TO: CITY OF PIQUA PARKS DEPT.

This membership (or any part of membership) can be revoked at any time by the City of Piqua without reimbursement, for giving fraudulent information intentional or repeated failure to comply with the rules and regulations set forth for the health, safety and enjoyment for all participants.

Date: _____

Applicant's Signature: _____

(Parent or Guardian must sign for anyone under 18)