

# 2011-2012 Pool at New Carlisle Season Pass Application

The rates listed below are good for the 2011 and 2012 Swim Season

## BUY ONE GET ONE FREE PROMOTION

Offer expires June 12<sup>th</sup>, 2011

**Rate:** Family Pass \$225.00 (2-4 family members living in the same household) Each additional person \$10.00  
Single Pass \$75.00 for Students/Senior Citizens \$125.00 or Adults 18 and older – Children 4 and under are FREE  
Grandparent Add-on \$40.00 **per year** (when added on to a regular Family Pass)

*Please fill out this form completely and return it to the City Building or New Carlisle Pool with payment*

### General Information

Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

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

Parent Work Phone \_\_\_\_\_ Parent Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

### Emergency Contact Information (additional contact in case a parent can't be reached)

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

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

### Type of Application

Student: \_\_\_\_\_ Senior: \_\_\_\_\_ Adult: \_\_\_\_\_ Family: \_\_\_\_\_

### Applicant Information: (please list names and ages of all family members – must be living in the same household)

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

If there are any known allergies or medical conditions associated to the above applicants please list below:

**TO AVOID MISUSE OF SEASON PASSES, WE ARE ASKING FOR A PASSWORD. YOU WILL BE ASKED TO GIVE YOUR PASSWORD WHEN ENTERING THE POOL.**

\*\*\* The password should be something that all family members can remember \*\*\*

PASSWORD: \_\_\_\_\_

### Swimming Pool Pass Agreements

*The undersigned hereby certifies that all persons listed on this application are immediate family members living in the same household and further understands that falsification of this application will result in the termination of the pool pass with no refund. (College students, home for the summer, can be included for family and/or student rates.) I agree to hold harmless the City of New Carlisle, its representatives, volunteers and employees forever from liability for any and all loss or damage, cost or expense, personal injury, property damage or wrongful death arising from swimming at the Pool at New Carlisle. I agree to obey the rules and regulations of the Pool at New Carlisle and follow instructions of the life guards, management, and all other staff. The City of New Carlisle make a reasonable effort to provide a safe swimming pool facility, however, the users of this facility do so at their own risk.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\* IF UNDER 18, APPLICATION MUST BE SIGNED BY A PARENT OR GUARDIAN \*\***

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**Office use:**

Rate: \_\_\_\_\_ Cash: \_\_\_\_\_ Check # \_\_\_\_\_ Date: \_\_\_\_\_