2019 Marysville Pool Membership Application

Member, Parent /Guardian or Responsible Adult's Information Last _____ First ____ MI Address: ______ City _____ Zip _____ Phone (home)______ (cell)______ (work)_____ Would you like to receive email notification for pool closings, events, information, etc.? Yes No Borough or Township You Live In: Name of Members (first & last name) Child's Date of Birth Child's Age Relationship to Member List additional children on reverse side. if needed **Membership Type Resident Rates** Non-Resident Rates Marysville Borough Only (please circle one) \$50.00 Senior (60+) \$50.00 Individual \$130.00 \$145.00 \$155.00 \$170.00 Family of 2 Family of 3 \$170.00 \$185.00 Family of 4 \$185.00 \$200.00 Family of 5 \$200.00 \$215.00 Family of 6 \$215.00 \$230.00 ***each additional child is \$7.50*** (children three (3) and under are free) I certify that the above information is true and correct and that I will be responsible for any damage(s) and/or actions incurred by dependent(s). I/we have read the Information Sheet, Rules and Regulations and agree to comply with all rules and regulations. Printed Name of Member, Parent or Guardian Signature of Member, Parent or Guardian Memberships can be paid by cash, check or credit card. Checks should be made payable to Marysville Borough Pool and can be mailed to 200 Overcrest Road, Marysville, PA 17053. OFFICIAL OFFICE USE ONLY

If membership is paid by credit card (CC) make sure the receipt is attached to this form.

Cash/CC/Check #:

Employee Initial:

Amount Received: _____