

The Village of Dobbs Ferry

Pool Application 2018

Family Name(s): _____ **Phone #:** (____) _____

Address: _____ **E-Mail:** _____

People included on the membership being purchased.

Name: _____ DOB: ____ / ____ / ____ Name: _____ DOB: ____ / ____ / ____

Name: _____ DOB: ____ / ____ / ____ Name: _____ DOB: ____ / ____ / ____

Name: _____ DOB: ____ / ____ / ____ Name: _____ DOB: ____ / ____ / ____

Membership Rates & Fees: May 26 - August 12	Residents	Non-residents
_____ Full season family	\$275.00	\$375.00
_____ Full season individual (18 and over)	\$135.00	\$235.00
_____ Full season junior pass (3 – 17 years old)	\$95.00	\$195.00
_____ Senior Citizen	\$40.00	\$60.00

Please make checks payable to: Village of Dobbs Ferry
AMEX, Discover, MasterCard, Visa accepted (with surcharge) for pool memberships!
Sorry, no cash accepted.

In consideration of your accepting this registrations form, I, the undersigned, for myself, my executors, administrators and assignees, do hereby release and discharge the Dobbs Ferry Recreation Department and any and all sponsors, organizers, and their representatives and successors from all claims of damages, demands, action and causes of actions whatsoever, in any manner arising or growing out of my participation in said program. I further attest that I am physically qualified to participate in this program.

I attest that I have read the rules and regulations of the Gould Park Pool and agree to abide by them. I further understand that not following the rules and regulations may result in the revocation of membership privileges.

Signature: _____ Date: _____

Parent's Signature (if child is under 18 years old): _____

For Office Use Only: **Check/CC:** _____ **Date Submitted:** _____ **Initials:** _____