

**Irongate Community Pool 2009**  
**Membership Application**

Name \_\_\_\_\_

Address \_\_\_\_\_

ZIP \_\_\_\_\_ Home Phone \_\_\_\_\_ Work \_\_\_\_\_

Cell/Pager \_\_\_\_\_ E-mail \_\_\_\_\_

Spouse's name \_\_\_\_\_

Work \_\_\_\_\_ Cell/pager \_\_\_\_\_ E-mail \_\_\_\_\_

Child # 1 \_\_\_\_\_ Age \_\_\_\_\_ M/F

Child # 2 \_\_\_\_\_ Age \_\_\_\_\_ M/F

Child #3 \_\_\_\_\_ Age \_\_\_\_\_ M/F

Child # 4 \_\_\_\_\_ Age \_\_\_\_\_ M/F

Emergency Contact \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Each family will receive 1 keycard for entry into the pool. A \$10 deposit is required for the key card which will be refunded at the end of the pool season when the card is returned. Membership time/date and household on file will be recorded into system and all membership will be monitored. No trading or swapping of cards allowed. Swim at your own risk. Children under the age of 16 must be supervised by an adult 18 years or older. Members are limited to 2 non-residential guests. Any violation of the pool rules may result in loss of pool privileges with no refund

I have read, understand and agree to all pool rules and regulations

Signature \_\_\_\_\_ Date \_\_\_\_\_

Type            Resident \$150                                  Non resident \$200

Payment      Cash                      check                      Check # \_\_\_\_\_ Amount paid \_\_\_\_\_