

Maplewood Pool Membership Application for the 2020 Season

Name: _____ Cell Phone: _____
Last First

Spouse: (if on Membership) _____ Cell Phone: _____
Last First

Address: _____ City, Zip: _____

Email Address: _____

Children's Names/DOB

Name	Birth Date

Name	Birth Date

I hereby make application for membership at Maplewood Park Recreation Club, Inc., for the 2020 season. I understand and agree that if the Board of Trustees acts favorable upon my application that:

1. I will abide by the posted pool rules at all times. Refusal to abide by pool rules can result in the suspension and/or loss of my membership without reimbursement of any paid fees.
2. My dress and my conduct shall be proper at all times.
3. I assume the responsibility for the supervision of my children (if applicable.) I understand that the use of the baby pool requires that I am personally supervising my young children at all times.
4. I hereby assume all risks in exercising my membership and waive all claims against the Club and Owners of the property.
5. This application is subject to approval of the Maplewood Board of Trustees.

Signature _____ Date _____
(*If applicant is under 18, a signature of a parent as well as the applicant, is required.)

Please check the type of membership plan you are applying for and payment type:

Membership Plan:

_____ Lifetime _____ Family _____ Couple _____ Single _____ Single Senior _____ Babysitter (with Family Plan)

Payment Type: _____ Check _____ Cash