



MINERSVILLE COMMUNITY SWIMMING POOL

2025 Season Pass Application

	<u>Resident</u>	<u>Non-Resident.</u>
Student	\$70.00	\$85.00
Adult – Single	80.00	100.00
Senior Citizen (55 and over)	55.00	75.00
Family*	140.00	170.00
Each additional child exceeding 5 in family.....	30.00 each	40.00 each

*A family consists of parents or couple and up to 3 children all permanent residents of the same household and same immediate family OR 1 adult and up to 4 children. Separate pass required for any adult 18 or older residing in the household, (adult children, grandparents, aunts, uncles). If a babysitter is listed on the pass, that individual will only be admitted with the children listed on the pass and as replacement for the parent(s). Also, the babysitter certification form must be completed.

Resident Pass Rates are for Borough Residents ONLY.
District Residents that reside in the townships must pay the Non-Resident rates.
Each ticket holder must permanently reside at the address listed below.

THE BOROUGH RESERVES THE RIGHT TO SEEK PROOF OF FAMILIAL RELATIONSHIP AND RESIDENCY. TICKET WILL NOT BE ISSUED IF FRAUDULENT INFORMATION IS PROVIDED. **POOL PASSES ARE NON-REFUNDABLE.**

Address: _____

Phone: _____

INDIVIDUAL PASS	AGE

Any checks returned will result in a Return Check Fee of \$40.00 and immediate suspension of the season pass.

FAMILY PASS			
<i>ALL BABYSITTERS MUST BE ENTERED ON NEXT PAGE</i>	AGE	Children exceeding 5 members in the family (additional charge applies)	AGE
Adult #1			
Adult #2			
Child #1			
Child #2			
Child #3			

By your signature below, you verify that all information presented here is true and correct.

For Office Use Only:

Amount Paid: _____

_____ Cash

_____ Check/M.O. # _____

Signature

Date of Purchase _____

MINERSVILLE COMMUNITY SWIMMING POOL BABYSITTER AUTHORIZATION FORM

Babysitters are permitted entry to the pool only when the Adults listed on the pass are not using the pass at that time.

Child/children's Full Name (first and last):

I, the undersigned, give permission for the caring of the above-named child/children while in attendance at the Minersville Community Swimming Pool to the person(s) listed below as authorized babysitters. (*Babysitters must be 16 years of age and older*)

Authorized Babysitters

I hereby authorize the person(s) named as authorized babysitters above to sign for medical treatment of my child/children while in attendance at the Minersville Community Swimming Pool.

I can be reached at the following numbers.

	Contact Number
Daytime	
Evening	
Cell Phone	

A non-parent cannot legally sign this waiver for other people's children. It must be signed by a parent/legal guardian.

Parent or Guardian Signature

Date