Milton Area Community Pool
Membership Application
2011

Name: _____ **Date:** _____

Mailing Address: _____

_____

Phone: _____

Types of Memberships

Family - $150.00 Adult - $75.00 Student - $45.00 Senior - $50.00

Full Name	Birth Date
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

After 5 family members an additional $10 is charged per person.

_____	_____
_____	_____
_____	_____

****

Amount Paid: $_____ ☐ **Cash** ☐ **Check**

Staff completing form: _____

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Attached waiver must be signed and dated by a parent or guardian.

_____ _____

Signature of Parent/Guardian **Date**