

**RIEGEL RIDGE COMMUNITY POOL MEMBERSHIP APPLICATION 2010**

Family Name: \_\_\_\_\_  
 Street: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Municipality: \_\_\_\_\_

Home Tel #: \_\_\_\_\_  
 Emergency Contact:  
 Name: \_\_\_\_\_  
 Tel #: \_\_\_\_\_

Holland Twp. Residents, include Lot # \_\_\_\_\_ Block # \_\_\_\_\_

**NOTE: ALL NON RESIDENT APPLICATIONS RECEIVED ON OR BEFORE MAY 1, WILL RECEIVE A 5% REDUCTION FOR EARLY REGISTRATION. SEE LISTING BELOW.**

**WE OFFER FULL SEASON MEMBERSHIPS ONLY**

Select applicable membership type(s):	HOLLAND RESIDENT	NON-RESIDENT	EARLY	SAVE
<b>Family</b> (see description below**)	\$300.00	\$450.00	\$427.50	\$22.50
<b>Individual</b> (1-59 yrs)	\$125.00	\$200.00	\$190.00	\$10.00
<b>Senior</b> (60 years and older)	\$ 90.00	\$140.00	\$133.00	\$ 7.00
<b>Third Adult in Family</b> (see restrictions below**)	\$110.00	\$125.00	\$118.75	\$ 6.25

Make check payable to: **RRCP**  
 Mail to: **Riegel Ridge Community Center**  
**910 Milford-Warren Glen Road**  
**Milford, NJ 08848-1619**

**NO REFUNDS FOR ANY REASON**

**List Persons Included in Membership:** (Each person receives a *non-transferable* card, which will be required for entry to the pool.) *Membership cards will be available at the pool after full payment is received. They will not be mailed.*

**Adult Members:** (Families - please indicate the adult's relationship to the children listed below, i.e. parent, caregiver.)

_____	_____	_____	_____
first name	last name	DOB	relationship to children
_____	_____	_____	_____
first name	last name	DOB	relationship to children

**Children:**

**List allergies or medical conditions for each**

1.	_____	_____	_____
	first name	last name	DOB
2.	_____	_____	_____
	first name	last name	DOB
3.	_____	_____	_____
	first name	last name	DOB
4.	_____	_____	_____
	first name	last name	DOB
5.	_____	_____	_____
	first name	last name	DOB
6.	_____	_____	_____
	first name	last name	DOB

**PLEASE CONTINUE AND SIGN ON BACK OF PAGE**

**Third Adult Member:** (A third adult in your family membership requires this person lives at the same address as the family and the above fee is in addition to the applicable family fee.)

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\*\* A family membership is limited to 2 adults and dependent children who reside in the same household. (Documentation of residency or family relationship for the children included in your membership may be requested.). You may wish to designate a caregiver or an extended family member such as a grandparent, as a third adult in your family membership. (Documentation of employment or extended family relationship may be requested.) Management does not wish to deny a family membership rate to any group of persons who can be considered a "family" unit. We understand there are circumstances that may not fit the family membership restrictions and may need special consideration. Please contact the Director or Program Coordinator through the Riegel Ridge Community Center at (908) 995-9260 with any requests or questions.

**I understand that providing false information on this application is an offense that may result in revocation of pool membership. My signature confirms that all information provided is true and correct. I also have received a copy of the current pool brochure and pool rules and agree, as a condition of continued membership, to abide by the RRCP Rules listed thereon.**

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**Adult Member Signature and Date**

If applying by mail, return completed form with full payment to the above address

**To qualify for early registration rate, payment must reach us on or before May 1, 2010**

Rev: 2/2010