

NEWTOWN CROSSING COMMUNITY ASSOCIATION
 2010 POOL REGISTRATION FORM
 (Please print clearly)

FAMILY Last Name: _____
 Street Address: _____ Newtown, PA 18940
 Home Phone Number: _____ Unlisted? Yes No (Circle one)
 Property Owner: _____ Tenant: _____ (Check one)
 Name & Phone # of Emergency Contact: _____
 (Please provide at least two contacts.) _____

Please List All Residents Living In The Home:

<u>Adults:</u> (First name, Last if different from Family name)	<u>Work</u>	<u>Cell Phone</u>	<u>Tag No.</u> (Pool staff)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<u>Children:</u> (First name, Last if different from Family name)	<u>Age</u>	<u>Birthdate</u> (mo/day/yr)	<u>Tag No.</u> (Pool staff)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please List All Health Problems For All Family Members: _____

POOL TAGS MUST BE WORN BY ALL MEMBERS TO GAIN ADMITTANCE.

Guest Passes are available for \$5.00 each with a limit of 5 guests per resident per visit.
 If additional Guest Passes are needed, please make arrangements with our Lifeguards.
 A book of 20 Guest Passes is available for \$60.00.
 Please order a book of 20 Guest Passes at the time of application.
 If paying by check, please make check out to N.C.C.A. and mail with application to:
NCCA Swim Club 206 Hidden Valley Ln. Newtown, PA 18940

 THIS APPLICATION MUST BE COMPLETELY AND ACCURATELY FILLED OUT
 BEFORE GAINING ADMITTANCE TO THE POOL. NO EXCEPTIONS.

TERMS OF AGREEMENT

Use of the Newtown Crossing Community Association pool is restricted to residents of the community and their paying guests. **Providing false information on this form regarding the resident status of any person will result in the loss of pool privileges for the entire family for the summer.**

 Signature

 Date