CITY OF HAGERSTOWN
MARYLAND
21740

APPLICATION FOR PREPAID POOL PASS

for Claude M. Potterfield Pool

Name: _____
(Phone#)
Address: _____

_____

E-mail: _____

The undersigned Applicant does hereby make payment in the amount of $_____ to cover seasonal pool pass for:

____ Preschool _____ Student _____ Adult _____ Senior _____ Family

It is understood by the undersigned and all persons eligible to use the public pool to the terms of this Application for Prepaid Pool Pass (hereinafter referred to as Pool Pass) as follows:

1. The Claude M. Potterfield Pool is a municipal facility owned and operated by the City of Hagerstown, Maryland, a municipal corporation existing under and by virtue of the laws of the State of Maryland.

2. Neither the Applicant/Payor or any of the persons eligible to use the public pool pursuant to this Pool Pass has any interest or right in said pool, nor do said persons have any right to propound any rules, regulations, or establish any policies pertaining to the Claude M. Potterfield Pool.

3. The undersigned and/or any and all persons eligible to use the public pool pursuant to this Pool Pass will act in a lawful manner while utilizing the pool facilities and in addition thereto, abide by all rules, regulations and procedures promulgated and established pertaining to the Claude M. Potterfield Pool by the City of Hagerstown, Maryland.

4. The undersigned, on behalf of himself/herself/themselves do further agree that in the event that any person eligible to use the public pool to this Application may, as a result of a violation of any one or more of the rules, regulations, conditions, etc., result in a revocation or suspension of the privilege of utilizing the Claude M. Potterfield Pool for a period of time or permanently, within the absolute discretion of the Manager of the City of Hagerstown Department of Parks & Recreation or his/her designee.

5. It is recognized by the undersigned on behalf of himself/ herself/themselves who may be entitled to exercise the privileges under this Pool Pass that the public pool may, in the future, be closed. In the event the Claude M. Potterfield Pool is permanently closed, or temporarily closed for more than (7) days, for whatever reason, then and in said event, the prepaid Pool Pass referred to herein shall be refunded to the payor based on a pro-rata basis. The refund shall be based on (3) months for the pool

season.

6. The undersigned and/or any and all persons eligible to use the public pool pursuant to the Application for Prepaid Pool Pass does also recognize and agree that the prepayment of Pool Pass set forth herein and the obtaining of an actual pool pass does not guarantee to the applicant, or those claiming under him/her that he/she/they will be given any preferences in usage of said pool.

IT IS UNDERSTOOD THAT BY VIRTUE OF PURCHASING THIS SEASONAL POOL PASS THAT THE RECIPIENT(S) RECEIVE ONLY THE BENEFIT OF PAYING A REDUCED FEE.

It is understood that the rates for the Pool Pass referred to are as follows:

	City Residents	Non-City Residents
2 & under	Free	Free
Preschool (3-4)	$25	$40
Student (5-12)	$55	$80
Adult (13-61)	$75	$100
Senior (62 +)	$50	$70
Family*	$125	$175

* If Family has more than 5 members, each additional person is $25 City Residents or $35 Non-City Residents.

Please see “Attachment A” of Pool Pass Application to see who qualifies as a family member.

The permit shall run Memorial Day weekend through Labor Day of each year, unless the pool is closed due to weather or other reasons beyond our control.

In the event that this is a family application, only those persons listed on Attachment A shall be given the privilege of utilizing the public pool under the provisions of this Pool Pass.

THE POOL PASS IS NONTRANSFERABLE

POOL PASS DOES NOT APPLY TO NIGHT SWIMMING OR OTHER SPECIAL ACTIVITIES

_____

Applicant’s Signature & Date

Payment is hereby acknowledged in the amount of $_____ for Prepaid Pool Pass from the above Applicant and this acknowledgment shall serve as the permit until a permanent permit card is issued.

City of Hagerstown

BY: _____

Please return and make check payable to:

City of Hagerstown
Parks & Recreation Division
351 N. Cleveland Avenue

Hagerstown, MD 21740

APPLICATION FOR PREPAID POOL PASS

Claude M. Potterfield Pool

Attachment A

I hereby certify that these persons are actually members of my family and qualify and are entitled to exercise the privileges under the Prepaid Pool Pass. (Family is defined as one or two adults and their unmarried dependents - natural, adopted, or foster children - who permanently reside at the address set forth on the Application for Prepaid Pool Pass. Children must be 18 years of age and under or their legal dependent.)

Name (Please Print)Birth Date & Relationship

_____

_____

_____

_____

_____

_____

_____

*Note: The cost of a Family Season Pass for a City Resident is $125 for up to 5 members, each additional person is $25 for Non-City Residents the cost for a Family Season pass is $175 each additional person is $35.

_____

Applicant's Signature & Date