

Season Pass 2019

Proof of residence Pool Use Form & Open Swim Registration Form

Last Name: _____ Family # _____

Greenville Resident? YES NO (no cost to Greenville Residents, \$65 for NI-residents)

Parents/guardian First & Last Name		
*Address		
City	State	Zip
Home Phone		Work/Cell Phone
Second contact name & Number		

*Must show Proof of residence.

Name of additional family members under 18yrs old	Age	DOB

Open Swim times may change through out the summer. Open swim may be canceled due to inclement weather and lack of participation due to weather.

Call Pool 878-4674 / E-mail townpool@greenvillenh.org / pool house bulletin board / Facebook Greenville Town Pool for any updates.

Filled out medical form? YES NO

Release:

I hereby give myself & child/children permission to participate in the Greenville Swim and recreational Programs at the Greenville Town Pool 16 Adams St. I am aware of the risks involved with swimming/volunteering/participating in recreational activities and do waive, release, and agree to hold harmless the Town of Greenville, Volunteers, and staff for any claim arising out of the regulations put forth by the pool, as operated by the Town of Greenville as well as take full responsibility for the actions of (all) the child(ren) listed above. Failure to obey the rules may result in dismissal from grounds. Town of Greenville is not held responsible when the pool closes due to inclement weather. Copy of rules and conditions are at Greenville town pool.

Parent/Guardian Signature _____ Date _____

Emergency Information Card

Last Name: _____ Family #: _____

In case of emergency, please contact:

Primary contact: _____ phone # _____

Secondary Contact: _____ phone# _____

Medical Information:

Anyone with Allergies and name allergies: YES / NO

Anyone with any other Medical concerns/conditions we should be aware: YES / NO
