



2010 Aqua Terrace Pool Registration

____ Non-Resident Family \$175.00	____ Non Resident Single \$100.00
=====	
____ **Resident Family \$150.00	____ **Resident Single \$75.00

Membership Information

Last Name _____ First Name _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work/Cell Phone _____

Please list below all dependant names, relationship and date of birth for a family membership:

- | | | | |
|----|-------|-----|-------|
| 1. | _____ | DOB | _____ |
| 2. | _____ | DOB | _____ |
| 3. | _____ | DOB | _____ |
| 4. | _____ | DOB | _____ |
| 5. | _____ | DOB | _____ |
| 6. | _____ | DOB | _____ |
| 7. | _____ | DOB | _____ |
| 8. | _____ | DOB | _____ |
| 9. | _____ | DOB | _____ |

If you have more than 9 please use the back of the form to list additional people

Please provide two names and numbers we can contact in case of emergency

Name _____	Phone Number _____
Name _____	Phone Number _____

Walbridge residents **must provide proof of residency to receive the "resident" rate (Acceptable proof- utility bill, lease or drivers license)

Payment methods cash, check or money order. Please make checks/money orders payable to "Village of Walbridge". You can mail or drop off the membership form with payment to Walbridge Administration Building 111 N. Main Walbridge, Ohio 43465. Each membership will receive two membership cards. Additional cards may be purchased for \$2 each. Membership cards will be mailed to the address provided on this form.

- 2010 Daily admission rate \$3.00 resident & non-resident

-----Office Use Only-----

Method of payment: _____ Cash _____ Check _____ Money order Date Received ____/____/2010

Membership Number: _____