MARIEMONT SWIMMING POOL 2015 MEMBERSHIP REGISTRATION

2015 REGISTRATION FEES	Early Registration Discount Rate (by May 22)	Regular Rate (purchased after May 22)
RESIDENTS: SEASON MEMBERSHIPS		
Family	290.00	315.00
Adult	130.00	140.00
Junior (Born after 9-1-98)	75.00	85.00
Child Under Age 2 - no pass required	A CONTRACTOR OF THE PARTY OF TH	
Senior	100.00	110.00
BABYSITTER: SEASON PASSES		
(May be purchased by adult member of the pool for use by that member's babysitter only in his/her role as babysitter for member's child(ren) while at the pool.)	75.00	85.00
RESIDENTS: ONE-DAY PASSES	THE STREET PORTS	
Adult	_	7.00
Adult (After 5:00 p.m.)	-	5.00
Junior		5.00
GUESTS: ONE-WEEK PASSES	that love in the late.	
Family House Guests (Must be accompanied by Mariemont Resident)		50.00
Individual House Guest (Must be accompanied by Mariemont Resident)		25.00
GUESTS: ONE-DAY PASSES		
Adult (Must be accompanied by Mariemont Resident)	-	7.00
Junior (Must be accompanied by Mariemont Resident)	2	5.00
Junior Guest Pass Card (Good for 5 Junior One-Day Swims)	17.50	17.50

Any parent(s) of a child(ren), who would like to purchase a child's season pass or a family membership, but cannot afford to pay the total membership fee at one time, may contact Mayor Policastro at the Village office (271-3246) to schedule a private meeting to arrange a payment program.

To register, use one of the following 4 options:

- 1. Register online on the Village website at www.mariemont.org using a credit card.
- 2. Bring your completed application and payment to one of the In-Person Registrations listed below:

DATES	TIMES	LOCATION			
Saturday, May 16th	10:00 a.m. to 12:00 Noon	Mariemont Pool - 6000 Mariemont Avenue			
Thursday, May 22nd	7:00 p.m. to 9:00 p.m.	Mariemont Pool - 6000 Mariemont Avenue			

- Mail your completed application with a check payable to the Village of Mariemont to Jordan Schad, 6907
 Wooster Pike, Mariemont, OH 45227. (Applications must be postmarked by May 22nd to be eligible for
 the early registration discount.)
- 4. Drop off your completed application and payment by May 22nd at the Village office, located on the 2nd floor of the Municipal Building at 6907 Wooster Pike. (The Village office cannot accept cash. Payment must be in the form of a check or money order payable to the Village of Mariemont.)

NOTE: If you register by mail or by dropping off your application at the Village office, you will receive your membership number the first time you come to the pool. Your cancelled check will be your receipt.

VILLAGE OF MARIEMONT, OHIO Swim Membership Application

I hereby certify that I am a resident of the Village of Mariemont. I also certify that anyone listed below (except babysitter) is a resident of my household and a relative by marriage, birth or adoption. I have read and understand the rules associated with swim pool membership and usage, and I agree that all members of my family and my guests will abide by them. I further agree to indemnify and save and hold harmless the Village of Mariemont from and for any and all liability, claims, suits, proceedings, demands, losses, damages, or expense of any name or nature, including administrative orders and proceedings, which applicant, or its invitees, sustains or incurs, including all claims regarding property loss, personal injury, or death, resulting in any way connected with Applicant's use of the Mariemont Community Pool and property. Applicant assumes full risk of any loss, injury, or damages whatsoever occurring while applicant, or any of its family or invitees, is utilizing the Mariemont Community Pool and/or property owned by the Village of Mariemont. This acknowledgement is further a covenant not to sue the Village of Mariemont for any cause or matter referred to herein and Applicant agrees that the provisions contained herein are intended to be as broad and inclusive as permitted by the laws of the State of Chio. This Agreement is freely and voluntarily signed with full knowledge of the consequences thereof.

		DATE:							
FAMILY NAME:								***************************************	
ADDRESS:									
HOME PHONE:	OTHER PHONE:								
E-MAIL ADDRESS :									
EMERGENCY CONTACT	NAME:								
EMERGENCY CONTACT	PHONE:				OTHE	RI	PHONE:		
					(Chec	k o	ne box below f	or each membe	er)
HOUSEHOLD MEMBERS (List First, Middle & Last Name)		AD	ULT	JUNIOR (Born After 9-1-99 Please give Date of Birth			SENIOR (68 OR OLDER)		
BABYSITTER									
Jr . Guest Pass Card (Go	ood for 5 Jr	1-day Sv	vims)						
	FC	OR OFF	ICE US	SE O	NLY B	EL	.ow		
MEMBERSHIP TYPE	FAN	MLY		SIN	SINGLE(S) MEMBERSHIP				RSHIP#
TOTAL NUMBER OF	ADULTS	JRS	SENIC	IORS BAI		CALLES AND CONTRACTOR OF THE PARTY OF THE PA			
AMOUNT RECEIVED \$		1	С	ach		Ch	eck On-Lin	na/Cradit Ca-d	2015