

Season Pool Pass Application 2020

Please Take Note: It has been a crazy spring, but we are able to open our pool with significant modifications for the summer. Woodcrest will need to monitor the number of people in the pool area in accordance with CDC guidelines. To allow as many families and groups as possible to enjoy the pool, we have made the following changes (subject to change). Season Pass Holders will be able to swim weeknights from 3:30-6:30. On most weekends, Pass Holders will be able to enter the pool at 3:30 and swim until 6:30. Please check out our website on a complete description of our Covid-19 policies related to the pool area.

To obtain a season pass, please complete the form below and return with payment **to the Woodcrest Retreat office**. Upon receipt of your registration your household will be added to our season pass list and may enjoy the use of the Woodcrest pool facility. We look forward to serving you and helping you have a refreshing summer!

Pool information can be found on line at: www.woodcrestretreat.org/recreation/swimming-pool

A Family Season Pass is defined as a father and/or mother and all dependents (claimed on tax form) living at the same address. This also includes foster and fresh air children.

Private Pool Parties available upon request.

2020 Season Pool Pass Registration Form

I / We have read the WOODCREST RETREAT pool rules and season pool pass policy and agree to abide by them. I understand that this pass is only for the 2020 pool season. The season pool pass is non-refundable and non-transferable.

FAMILY SEASON POOL PASS \$170.00 on or before May 28th SINGLE ADULT POOL PASS \$65 on or before May 28th

\$185.00 after May 28th

\$75.00 after May 28th

PLEASE PRINT names of individuals included in the season pool pass.

| Last Name | First Name | Age | M/F |
|-----------|------------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

This form and the accompanying payment must be received in the camp office 3 days prior to your first visit to the pool.

Please make check payable to Woodcrest Retreat according to the pricing schedule above.

**Mail to: 225 Woodcrest Drive
Ephrata, PA 17522**

Address _____

Phone Number _____ Email _____

WOODCREST RETREAT ASSUMES NO RESPONSIBILITY FOR ANY ACCIDENTS OR INJURIES IN CONNECTION WITH USE OF THE POOL. PERSONS USING THE POOL RELEASE AND INDEMNIFY WOODCREST RETREAT AND ITS MEMBERS FROM ANY CLAIMS IN CONNECTION WITH ANY LOSS OF LIFE OR PERSONAL INJURY OR DAMAGE OR LOSS OF PERSONAL PROPERTY.

Signature _____ Date _____

Printed name _____