



2024



Womelsdorf Pool Member Application

Membership Applications can also be filled out online at www.womelsdorfpool.com/memberships

Name: _____
LAST FIRST

Address: _____
STREET CITY ZIP CODE

Phone Number(s) : _____
HOME CELL WORK

Email Address: _____
(this will not be shared with anyone)

Date of birth: _____ (if under the age of 18 years old)

Please list ALL members below: All members must reside in the same household (proof of residency may be requested)

Name Age & Date of Birth (if under the age of 18 years old)

1-Primary. _____

2. _____

3. _____

4. _____

Add On's

5. _____

6. _____

Please make all checks and money orders payable to Womelsdorf Borough. If paying by card, there will be a 3% convenience fee per transaction.

Below For Office Use Only

Cash/Check/Money Order/Credit Card Payment * Includes 3% convenience fee per transaction

Family Membership: _____ x \$300.00 (includes 4 memberships) = Total \$ _____

Additional to Family Membership: _____ x 50.00 = Total \$ _____

Number of Individual Member(s): _____ x \$105.00 per membership = Total \$ _____

Number of Senior Member(s) over 65: _____ x \$90.00 per membership = Total \$ _____

Guest passes-only available until May 20th, 2024 Max Purchase Allotment: 3 per Individual, 6 per Family

Number of Guest Passes: _____ x \$5.00 = Total \$ _____

Overall Total \$ _____

Payment Method: _____ Check/MO _____ Cash _____ Credit

Date Payment Received: _____ Payment accepted by: _____

Emergency Contact Information

Name of person(s) to be notified if a family member becomes injured. Please include all relevant numbers. We recommend you give contact information for all the adults of your home as well as one contact that does not live in the home. Please feel free to include as much information as you would like. Please list any health-related issues that our staff should be aware of, such as allergies, hard of hearing, etc.

***MINIMUM OF 2 EMERGENCY CONTACTS MUST BE FILLED OUT**

Contact 1: _____

Contact 2: _____

Relationship: _____

Relationship: _____

Home Phone: _____

Home Phone: _____

Cell Phone: _____

Cell Phone: _____

Work Phone: _____

Work Phone: _____

Please list a Primary Care Doctor for severe emergency situations: ***MUST BE COMPLETED**

Hospital Preference: _____

Primary Care Office: _____

Primary Care Doctor: _____

Address: _____

Phone Number: _____

This information above is never shared with anyone, and only used in case of a severe emergency situation to provide to First Responders.

Any false information on the pool application is cause for automatic forfeit of membership with no refund. In the event of an emergency situation, I/We hereby grant the Womelsdorf Pool Personnel permission to secure medical attention for myself and/or my dependents without involving the Pool Staff and/or Borough of Womelsdorf in any liability. Parent(s) and/or Guardian(s) are signing on behalf of any minor children listed on this application. This includes everyone listed on this membership application.

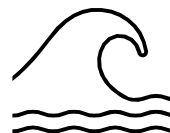
Signature: _____ Date: _____

Signature: _____ Date: _____

This form must be filled out entirely, signed and returned with payment for your membership application to be accepted.



Womelsdorf Pool General Rules 2024



***This form MUST be signed and dated by adult/legal guardian, confirming ALL members included in the membership have been made aware of these Pool Rules and the consequences of not adhering to them. ***

1. **NO SMOKING, VAPING, ALCHOHOL OR ILLEGAL SUBSTANCES ON POOL PROPERTY INCLUDING PARKING LOT.**
2. The use of the pool when no regular lifeguard is in attendance is strictly prohibited.
3. No children under the age of twelve (12) will be allowed on the pool premises without the attention of an adult (by law, an adult is defined as a person eighteen (18) years or older.)
4. All children under the age of three (3) or ANY non-toilet trained child must wear a swim diaper and bathing suit in the pools. Check diapers frequently.
5. The baby pool is only for children five (5) and younger and must have constant parental supervision.
6. No running or horseplay on pool deck.
7. Appropriate swimwear is required. Street clothing is prohibited for safety reasons.
8. Pitching of tents of any kind is not allowed.
9. Swimmers may only do front forward dives from the pool side in specified areas.
 - a. RED LINE AREAS = NO DIVING
10. The Facility will follow the guidelines of the U.S. Center for Disease Control with regard to fecal incidents, which may require clearing or closing the pool for disinfection.
11. Pool Hours: as posted at the pool.
 - a. The pool or any section may be closed for maintenance, staffing, or attendance at the discretion of the Pool Manager or Borough Council.
12. Health and Safety Rules to Observe while on pool grounds:
 - a. No Large Cooler or rolling coolers are allowed. Small personal cooler only (6 pack size). Coolers may be searched at the gate. No outside food permitted.
 - b. Inappropriate behavior will not be tolerated on pool premises and could lead to removal from pool premises. Ex: foul language, diving in shallow areas, not following rules.
 - c. No pets or animals on pool premises.
 - d. Admission to the pool can be refused to any person having an open wound, communicable disease or if appearing intoxicated.
 - e. The pool and decks will be cleared for 30 minutes following the sound of thunder and/or sighting of lightening.
 - f. A cleansing shower prior to swimming is strongly recommended.
 - g. The use and possession of a cell phone or any other photographic or recording device in the bath houses is strictly prohibited.
 - h. Headphones must be worn when listening to personal music devices.
 - i. Sliding must be done feet first sitting or lying on your back.
 - j. No hard balls, squirt guns, Orbee guns, water balloons, etc. Small rafts or large rafts are permitted based on attendance.

13. Lifeguards and Personnel

- a. No socializing with lifeguards, front gate staff, or kitchen staff while on duty
- b. Respect and obey all guards and personnel.
- c. If a lifeguard blows the whistle three times, leave the water immediately.
- d. Only authorized personnel are permitted on lifeguard stands.
- e. Swimmers must be 4ft tall and/or pass a swim test before the use of slide or diving board.
- f. Only authorized personnel are permitted entrance to the filter and chemical rooms,
- g. The three (3) foot areas are for non-swimmers and parents with their children under the age of twelve (12).
- h. Supervision of children under the age of twelve (12) is the responsibility of the adults bringing those children.

14. No littering is allowed. Please use the trash and recycling receptacles.

15. The YMCA and/or Womelsdorf Borough shall not be responsible for any accidents, injury, valuables, or individual property that is brought to the facility.

16. Cost of property damage repair shall be charged to the responsible person(s).

17. Additional YMCA Rules may apply.

Discipline Policy

Offense: Warning is issued.

Second Offense: The offender will be benched for a period of time by the lifeguard or manager.

Third Offense: Offender will be given suspension from the pool. Time length will be discretion of the manager.

Disclaimer: These rules may be revised, or additional rules established at any time by the Borough. The Borough reserves the right to waive any rule it deems necessary.

Please sign below to acknowledge that you read and agree to abide by all the rules.

PRINT NAME _____

DATE _____

SIGNATURE _____