

## 2020 POOL Membership Form

Senior, Youth & Leisure Services, 204 Hillside Avenue, Livingston, NJ 07039

PH: 973-535-7925 Fax: 973-535-2949 Email: [syls@livingstonnj.org](mailto:syls@livingstonnj.org)

**Make Checks Payable to: Township of Livingston**

Photos required for all members age 3 and up

NEW

RENEWAL

**PRINT:** Last Name \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work \_\_\_\_\_

Member Name <small>(include last name if different from above)</small>	Relationship	Sex <small>(M/F)</small>	CHILD(REN) DOB		OFFICE USE ONLY:
	<b>Self</b>				<b>RESIDENT FEE:</b> \$
	<b>Partner</b>		<small>DOB (MM/DD/YY)</small>	<small>Age as of 12/31/2020</small>	<b>NON-RESIDENT FEE:</b> \$
					<b>AU PAIR / CAREGIVER / BABYSITTER:</b> \$
					<b>OTHER:</b> \$
					Discount % _____ ( \$ _____ )
					<b>SUB—TOTAL:</b> \$
					Replace. Pass: ___ @ \$10.00 \$
					Guest Badges: ___ @ \$10.00 \$
					<b>TOTAL:</b> \$
					Rec'd By: _____ Date: _____ BC Verified: _____ Cash: _____ Check # _____ Credit Card <input type="checkbox"/>

**Payment by credit card available online or in person registration only.**

**REGISTRANT MUST SIGN BELOW.**

In consideration of your accepting our pool membership, I hereby for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my children) may have against the Township of Livingston and its representatives, successors and assigns for any and all injuries/illness suffered by myself, my family members or my guests. I hereby give permission for my family members' names and pictures to be used on the recreation website or for recreation publicity. In case of emergency, I hereby give the Township of Livingston permission to call emergency medical services to transport my child or myself to an appropriate medical facility. I hereby certify that the information given on this application is correct, and I will abide by the membership rules and regulations and will inform all family members and guests of the rules and risks involved at the swimming pools.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**2020 Livingston Community Pool Rates  
Early Bird Rates in effect through Summer 2020**

Early Bird *	Early Season Open-7/31	Late Season 8/1-Close	Weekly Mon - Fri	Weekend Sat, Sun & Holidays
<b>Family - Res</b>	\$340	\$272	\$272	\$272
<b>Family - NR</b>	\$392	\$313	\$313	\$313
<b>Couple - Res</b>	\$227	\$156	\$156	\$156
<b>Couple - NR</b>	\$255	\$177	\$177	\$177
<b>Individual - Res</b>	\$165	\$136	\$136	\$136
<b>Individual - NR</b>	\$193	\$156	\$156	\$156
<b>Sr. Couple - Res</b>	\$163	\$120	\$120	\$120
<b>Sr. Couple - NR</b>	\$189	\$139	\$139	\$139
<b>Sr. Individual - Res</b>	\$110	\$79	\$79	\$79
<b>Sr. Individual - NR</b>	\$137	\$91	\$91	\$91
<b>Au Pair/Caregiver</b>	\$100	\$100	\$100	\$100

\* Includes 5 free guest passes per family membership & 2 free guest pass for all other Early Bird Discount categories.

<b>Replacement Pass</b>	\$10
<b>Purchase at the Pool</b>	
<b>Daily Pass (18 &amp; Over)</b>	\$25

<b>Guest Pass</b>	\$10
<b>Daily Pass (3-17)</b>	\$15

**Family** - self & spouse/partner plus all dependent, single children 24 years of age or younger by end of current calendar year who are living together as a family unit within the Twp of Livingston

**Couple** - self & spouse/partner or adult with one child, 1-24 years of age by end of current calendar year, who reside at the same address.

**Individual** - self ONLY

**Sr. Couple** - any couple where one partner is at least 62 year of age by the end of the current calendar year. Proof of age is required.

**Sr. Individual** - any person age 62 years of age or older by the end of the current calendar year. Proof age is required.

**Au Pair/Caregiver/Babysitter** - this membership is available as an add on to a current Family Membership. Fee is \$100 in addition to the Family Membership fee.