2022 SEASON FEES

Annual Pool Membership Fees

Individual	235+16.45 = 251.45
Family of 2	\$365+25.55 = \$390.55
Family of 3	415+29.05 = 444.05
Family of 4	\$455+31.85 = \$486.85

10% is **only** given for Membership Fees paid in full prior to Mar. 1, 2022

Payment plan receives no discount and must be paid in full prior to Opening Day May 27, 2022

This discount does not include add-ons, luau tickets, or guest passes

Membership Fee: \$_

(no discount after March 1st)

Initials:

<u>Sitter/Grandarent Pass</u>

This is intended for parents who work and child care is needed. The child needs to be under the age of 12 and in need of a sitter. Sitter or grandparent can only use this pass if the parent is not able to visit. This pass does not allow a sitter/g-parent to visit without a child on membership. \$95.00 +6.65 =\$101.65

Name/Relationship/DOB: _____ Add-On Member: \$_____

(no early discount)

2022 Concession Stand Credit

Start off the summer with a concession credit of your choice. Tab will be prepared for you on opening day.

Concession Stand Credit: \$_____

(no early discount)

2022 Guest Pass Punch Cards*

All guests must be accompanied by the <u>member</u> who purchased the guest pass.

Must be used in Summer of 2022 ONLY...Lost card/s will not be replaced. May not be used with party rental Discounted Guest Pass* \$30 for 5 pass punch card

#Cards ____x \$30= \$ _____ Guest Pass Punch Cards: \$_____

(no early discount)

MUST BE PURCHASED PRIOR TO OPENING DAY OR WHEN PURCHASING MEMBERSHIP

TOTAL DUE: \$_____

(3% will be added for Credit Card App)

Please Make Checks Payable to: Melody Pool 313 Scott Dr. Englewood, Ohio 45322

 OFFICE USE ONLY:

 Date:
 ______ Amount:

 Cash:

 Check #:

Payments/Dates:

CC: _ CVV:

EXP:

MELODY POOL SWIM CLUB 2022 MEMBERSHIP APPLICATION

Members MUST be immediate family and LIVE in the same household *Verification may be asked for, if needed*

Please print neatly. **MEMBERS*:**

First Name	Last Name	Birthdate
1		//
2		//
3		//
4		
5		<u>//</u>
6		<u>//</u>
7		/
8		

ADDRESS:

Street Address:	City & Zip:
Phone Number:	Email:
Phone Number:	Email:

Emergency Contacts: Please list name, phone and relationship to family

1. Name: _____ Phone: _____ Relation:

Memberships may be paid by *Credit Card, Cash, Check, or **3 Payment Option

<u>*Credit Card Payment Instructions:</u>

- Mail or Scan/Email both side of application....A receipt will be text to you upon final payment.
- **3-5 Payment Option may start in January: Must be paid in full prior to Opening Day
 10% not granted with this option
- Additional 3% fee will be added to total. Must have email address to pay by credit card.
- Final payment must be received prior to Opening Day, May 27th *unless approved by Management
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CC:	EX:CVV:
X	DATE:
SIGNATURE	*I agree all of the above information is correct & CC authorization if given*