

**Bethlehem Township Community Center**  
**4225 Easton Avenue**  
**Bethlehem, PA 18020**  
**610-332-1900 (phone) - www.bethlehemtowship.org**

**Membership Fees & Application – Outdoor Pool**

Primary Family Member Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

Membership Card Holders (list all members including the person completing application)

<u>Full Name</u>	<u>Birth Date</u>	<u>Gender</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you, or any of the cardholders listed above has special medical conditions or allergies, please explain below.

\_\_\_\_\_  
\_\_\_\_\_

Prior to purchasing a membership, please read and sign a Membership Agreement form.

**Outdoor Pool Membership**

_____ Individual Adult	\$125.00
_____ Individual Youth	\$75.00
_____ Household of 2 (under 62 years – no add-ons permitted)	\$225.00
_____ Individual Senior Citizen (over 62)	\$75.00
_____ Household of 2 (over 62 years – no add-ons permitted)	\$125.00
_____ Household (2 adults & up to 3 children)	\$250.00

\*\*\* Only 3 children are permitted per household pass before an add-on is applied for child members at \$25 per child. Child must reside in household.

**Total Enclosed \$** \_\_\_\_\_

**Form of Payment (check one):**

\_\_\_\_\_ **Check (payable to Township of Bethlehem) #:** \_\_\_\_\_

\_\_\_\_\_ **Mastercard/Visa/Discover/Amex**

\_\_\_\_\_ **Cash**

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**Membership Agreement**

**I acknowledge that I have read, understand and agree to the following (initial each line please).**

\_\_\_\_\_ All members must check in at the outdoor pool entrance upon arrival to the pool. Children, ages 2 years and under, are not required to have a membership card or present a membership card when accompanied by an adult member.

\_\_\_\_\_ Members must abide by all regulations, COVID-19 policies, and pool operation procedures of the Bethlehem Township Community Center, or privileges to the outdoor pool may be revoked.

\_\_\_\_\_ Members must not visit the outdoor pool if any member of their household family is not feeling well, has COVID, or know they have been exposed to COVID within the past 14 days.

\_\_\_\_\_ Members understand that in compliance with PA guidelines, there are capacity limits to the outdoor pool and the Township of Bethlehem cannot guarantee admission to the pool every day if capacity is met. Refunds will not be given.

\_\_\_\_\_ Membership cards remain the property of the Township of Bethlehem and must be returned if requested.

\_\_\_\_\_ The Township of Bethlehem will not be responsible for lost or stolen articles.

\_\_\_\_\_ I understand that this agreement is an instrument for payment of the membership purchased, as reflected on the Membership Fees and Application – Outdoor Pool Form, and I am obligated to fulfill this agreement completely. I am responsible for all costs and expenses, including attorney fees and collection fees, incurred by the Township of Bethlehem in collecting the balance due.

I expressly understand and agree that neither the Township of Bethlehem, a municipal corporation, nor any of its agents, volunteers, or employees shall be held responsible or made the subject of any claim seeking to assess damages or liability for or arising from personal injury or property damage or loss of any other sort to myself or other person on whose behalf this form is now signed as a result of actual or proposed participation in the above named program or activity, and I hereby agree to defend, indemnify and hold the Township of Bethlehem, its officers, agents, volunteers, assistants, or employees harmless on account of any such claim, whether caused by negligence or otherwise. Participants involved in the Township of Bethlehem Community Center programs may be photographed. **By signing this agreement, the member agrees that photographs of him/her may be used for marketing purposes.**

**The undersigned states that she/he has read and understands all terms of this agreement, and agrees to be bound to this agreement and acknowledges that she/he has received a copy of this agreement, if requested.**

**Signature:** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_

**Printed Name:** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_