

Key Card # \_\_\_\_\_

## Irongate Community Pool Membership application 2024

### Membership fees:

- Residents \$195.00       Military (Active Duty, Retired, and card carrying Veterans) \$170.00  
 Sr. Citizen residents (60+) \$170.00       Replacement Key fee \$15.00

Name \_\_\_\_\_

Address \_\_\_\_\_

Cell Ph# \_\_\_\_\_ Home Ph# \_\_\_\_\_ Work Ph# \_\_\_\_\_

Email \_\_\_\_\_ Secondary Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

*Family membership is limited to members of a household that reside in Irongate*

Family Member's Names	Age	M/F	Family Member's Names	Age	M/F

- My signature below indicates that I understand that there is NO LIFEGUARD and use of the pool is at my own risk.
- Each family will receive one (1) key card for entry into the pool.
- Members should retain and keep safe their Pool Key from season to season. Replacement keys are \$10.00.
- No trading, swapping or lending of key cards is allowed. Doing so will result in loss of membership.
- Children under the age of 16 must be supervised by an adult 18 years or older.
- **GUESTS:** Pool members over 18 may bring in up to four (4) nonmember guests on any one day as long as the guest(s) is NOT an Irongate resident. Guests must be accompanied by members while on the pool grounds. Members are responsible for the behavior of their guests. Members are asked to not abuse this privilege at the risk of losing their membership.
- Residents of Irongate cannot attend the pool as a guest of another resident.
- Any violation of the pool rules may result in loss of pool privileges with no refund.
- No smoking or vaping in the pool or pavilion area.
- Members who do not wish to rejoin the pool can turn their pool key in at any time.

### SWIM AT YOUR OWN RISK

I have read, understand and agree to all pool rules and regulations. Failure to abide by these regulations will result in revocation of pool membership without refund. A pool membership requires the member to assume any risk associated with attending the pool or recreation area.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Payment Information

Payment: Money Order  Check  Check # \_\_\_\_\_ Total Paid \$ \_\_\_\_\_

Received by \_\_\_\_\_ Date \_\_\_\_\_