



The Township of West Caldwell invites you to join the West Caldwell Swimming Pool. Last season we conducted a survey to learn your opinions regarding smoking at our pools. Your response overwhelmingly supported prohibition or restricting smoking. As such, smoking will be prohibited or restricted to designated areas at both pools.

**Dominick J. Aiello, Chairperson
West Caldwell Pool Utility**

Be Sure to Complete and Return Both Forms Below Along With Your Payment.

Name _____
Please Print Last Name First Name

Address _____ **Telephone No.** _____

TREASURY CONTROL

Names of family members including self Designate age 62 or over	Age on June 1, 2010	Relationship	(Office Use Only)
	*	Parent	
	*	Parent	

The above must be completed accurately.

(Check one) 2009 Pool Member New Member

PROOF OF RESIDENCY WILL BE REQUIRED.

VIOLATIONS OF ADOPTED RULES MAY RESULT IN REVOCATION OF MEMBERSHIP WITHOUT REFUND.

I hereby certify that the information given above is correct and that I will abide by the Swimming Pool Membership Rules and Regulations.

Do Not Detach

Signed _____

Name _____
Please Print Last Name First Name

Address _____ **Telephone No.** _____

POOL CONTROL

Names of family members including self Designate age 62 or over	Age on June 1, 2010	Relationship	(Office Use Only)
	*	Parent	
	*	Parent	

The above must be completed accurately.

(Check one) 2009 Pool Member New Member

PROOF OF RESIDENCY WILL BE REQUIRED.

VIOLATIONS OF ADOPTED RULES MAY RESULT IN REVOCATION OF MEMBERSHIP WITHOUT REFUND.

I hereby certify that the information given above is correct and that I will abide by the Swimming Pool Membership Rules and Regulations.

Do Not Detach

Signed _____

**ANYONE FALSIFYING THIS APPLICATION, OR ANY PERSON
DETECTED LENDING HIS OR HER BADGE, WILL HAVE THEIR
MEMBERSHIP REVOKED WITHOUT REFUND.**

All badges must be picked up at the West Caldwell Municipal Building, 30 Clinton Road, 9:00 a.m. to 4:30 p.m. weekdays or Monday evenings from 4:30 p.m. up to 7:00 p.m.

PROOF OF RESIDENCY FOR **EACH** MEMBER 21 YEARS OF AGE AND OVER WILL BE REQUIRED TO OBTAIN BADGES. **NO EXCEPTIONS WILL BE MADE.** YOUR BADGE ENTITLES YOU TO SWIM AT BOTH WESTVILLE AVE. POOL AND CEDAR ST. POOL. BADGES CANNOT BE PICKED UP AT THE POOLS. GUEST BADGES ARE \$50.00 FOR A BOOK OF 5 AND CAN ONLY BE PURCHASED AT EITHER POOL.

SEE REVERSE SIDE

NON-RESIDENT MEMBERSHIP

TREASURY CONTROL

**WEST CALDWELL SWIMMING POOL
2010 Season Membership**

THIS IS YOUR APPLICATION AND BILL for membership. Be sure to return this form with your payment. CHILDREN UNDER AGE TWO (As of June 1st) MUST BE REGISTERED ON APPLICATION BUT NOT REQUIRED TO PAY A MEMBERSHIP FEE. NO REFUNDS WILL BE MADE FOR ANY REASON AFTER OPENING DAY.

**Make checks payable to WEST CALDWELL POOL and mail to:
Township of West Caldwell, 30 Clinton Road, West Caldwell, NJ 07006**

TREASURY CONTROL

	PAID BY 4/30/10	PAID AFTER 4/30/10
1. Couple Membership (Two individuals living at the same address)	\$415.00	\$455.00
2. Family Membership (Family includes two parents and all unmarried children 25 years old or under. All other relatives and individuals living within the household must obtain Seasonal Resident Membership and show proof of residency).....	\$475.00	\$510.00
3. Single Membership	\$290.00	\$320.00
4. Senior Citizen Membership (62 years and older)	\$150.00	\$175.00
5. Seasonal Resident/Sitter Membership (must be purchased by resident in addition to a Single, Senior Citizen, Couple or Family Membership)	\$180.00	\$215.00
6. Adult Weekend Membership (18 years and older, Saturday, Sunday & Holidays only)	\$185.00	\$215.00
7. Twilight Membership (5:00 p.m. to closing, Monday – Friday only)	\$155.00	\$175.00

Do Not Detach, Return Both Forms

PRESORTED STANDARD U.S. POSTAGE PAID CALDWELL, NJ PERMIT NO. 16

**DATED
MATERIAL**

CURRENT RESIDENT
CALDWELL, NEW JERSEY 07006