

# 2010 Lemoyne Borough Swimming Pool Information

The Community Swimming Pool will open **May 29, 2010**. Memberships are available at the Lemoyne Borough Office or by completing the application form at the bottom and mailing it along with the membership fee to: ***Borough of Lemoyne, 510 Herman Ave, Lemoyne, PA 17043***. Make check payable to: ***Lemoyne Borough. THE BOROUGH WILL NOT ISSUE REFUNDS FOR MEMBERSHIPS!*** The Borough reserves the right to close the pool due to emergency situations, inclement weather, pool attendance, or for special events.

**POOL SCHEDULE** - The pool will open on May 29. The pool will officially close on Labor Day, Sept. 6, 2010.

**POOL HOURS** - Monday through Sunday - 12:00 Noon to 8:00 pm. Closures and 1/2 days will be posted.

WALK-IN FEES	ADULT (13 or over)	YOUTH	FAMILY (up to 4)
DAILY M-F (12 – 8PM)	\$8.00	\$6.00	\$20.00 (additional children \$3 each)
WEEKENDS	\$10.00	\$8.00	\$25.00 (additional children \$3 each)
EVENINGS (5PM - 8PM)	\$4.00	\$2.00	\$10.00

Children 3 years and younger are admitted at no charge. You may be asked for proof of age.

Children up to and including 10 years old **must** be accompanied by an adult.

Group rates & after hours pool party rates - contact Lemoyne Borough @ 717-737-6843.

ADMISSION RATES	Lemoyne Borough Residents			All Other		
	Before June 30	After July 1	After August 1	Before June 30	After July 1	After August 1
Family * (Up to 6)	\$150	\$100	\$75	\$185	\$125	\$95
Adult (age 13 & over)	\$60	\$40	\$30	\$100	\$70	\$50
Youth	\$40	\$30	\$20	\$65	\$45	\$35
Senior Citizen (55+)	\$25	\$20	\$15	\$35	\$25	\$20

***\*Restricted to immediate family members who are borough residents ONLY (2 Adults and 4 Children). This includes children up to 17 and or 18 yrs of age only if graduating high school in June of 2010. Each additional child on the application is \$10.00 per child. To enter the pool you must present your pool membership pass or pay the appropriate walk in fee.***

## 2010 Swimming Pool Membership

Type of Membership:    \_\_\_ Family    \_\_\_ Adult    \_\_\_ Youth    \_\_\_ Sr. Citizen

Name of Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

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

MEMBER NAMES:	Age	Relationship	Card #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____