

NEW CARLISLE POOL 2017 Season Information

DAILY RATE

Student: \$5 (5-17)

Seniors: \$5 (65 and up)

Adults: \$6 (18 and up)

Spectator: \$3
(non-swimmer)

*Children 4 and under are
FREE with a paid admission*

After 6pm: \$3 per person

FAMILY OF 4 SEASON PASS

Pre-Purchase DISCOUNTS!!

Pre-Purchase Oct. 1 thru Dec. 31: \$150

Pre-Purchase Jan. 1 thru April 15: \$175

Pre-Purchase April 15 thru Memorial Day: \$200

Purchase after Memorial Day: \$250

\$10 each additional family member over 4

Grandparents can be added to family pass for \$50 (each) per year.

SINGLE MEMBER 1 YEAR SEASON PASS

Student: \$100 (5-17)

Senior: \$100 (65 and up)

Adult: \$125 (18 and up)

Spectator: \$50.00
(non-swimmer)

SPECIAL EVENTS

The New Carlisle Pool offers group rates for birthday parties, family reunions or private after-hour parties.

Rates include use of the pool only.

Rates are based on 25 persons while the pool is open or 50 persons after hours. Additional cost will occur if number of persons exceeds the number listed above.

DURING POOL HOURS PARTY

Members: \$80/3hrs

Non-Member: \$120/3hrs

AFTER HOURS RENTAL

Members: \$150/2hrs

Non-Member: \$225/2hrs

\$25 per hour will be added for additional 1-25 persons.

POOL PERKS

Heated Pool

Special Events

Swim Lessons

After Hours Swims

Lounge Chairs

Picnic Tables

Sand Volleyball

Birthday Parties

Shelter Area

Basketball Court

Baby Pool

Concession Stand with...

Sandwiches, Pizza, Snacks,

Drinks, Candy

...AND MUCH MORE

POOL HOURS

May 27th - July 31st

Monday- Sunday: noon - 8pm

August 1st - August 20th

Monday- Friday: noon - 7pm

The pool may be closed for inclement weather, low patronage, maintenance, health conditions, or for any other reason deemed necessary by the New Carlisle Pool Managers.



***CREDIT & DEBIT CARDS ACCEPTED AT THE GATE
AND AT THE CONCESSION STAND THIS SEASON!***

SORRY! No food or drinks are permitted to be brought in to the New Carlisle Pool

Pool Rules & Regulations

- Children must be at least 10 years old and pass a swim test to stay alone at the pool. If under 10 years, you must be with a responsible person that is over 16 years and has passed a swim test.
- All patrons must be willing to take a swim test.
- No carry-in food or drinks allowed.
- All members must have photo taken and give the attendant their "PASSWORD" upon each entry.
- Non-Members must pay and sign in to enter the pool area.
- No smoking by anyone under the age of 18. Smoke in SMOKING AREAS ONLY.
- All non-toilet trained people must wear swim diapers in the pools.
- No alcohol or drug abuse will be tolerated.
- Baby pool is for children 5 years and under and your child MUST be accompanied by an adult at ALL TIMES.
- All of the rules are posted at the pool.

NEW CARLISLE POOL • 301 E. Lake Street • New Carlisle, Ohio 45344 • 937.845.8116

For more information and event listings, go to www.facebook.com/newcarlislepool

2017 New Carlisle Pool Season Pass Application

FAMILY PASS: (2 to 4 Family Members living in the same household)

Pre-Purchase: Oct. 1 thru Dec. 31: \$150 • Jan. 1 thru April 15: \$175 • April 15 thru Memorial Day: \$200 • After Memorial Day: \$250
Each additional person \$10

Grandparents add on \$50 (this add on is for Senior Citizens only added to a regular Family Pass)

SINGLE PASS: Student: \$100 (5-17) • Senior: \$100 (65 and up) • Adult: \$125 (18 and up) • Spectator: \$50 • Children 4 and under are FREE

Please fill out this form completely and return it to the City Building or New Carlisle Pool with payment.

General Information

Name: _____ Home Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Parent Cell Phone: _____ Parent Cell Phone: _____

Parent Work Phone: _____ Parent Work Phone: _____

Email Address: _____

Emergency Contact Information *(additional contact in case a parent can't be reached)*

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

Type of Application

Student: _____ Senior: _____ Adult: _____ Family: _____

Application Information *(Please list names and ages of family members — must be living in the same household)*

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

Name: _____ Age: _____ Name: _____ Age: _____

If there are known allergies or medical conditions associated with the above applicants. Please list below.

**TO AVOID MISUSE OF SEASON PASSES WE ARE ASKING FOR A PASSWORD. YOU WILL BE ASKED FOR YOUR PASSWORD WHEN ENTERING THE POOL
YOUR PHOTO WILL BE TAKEN**

****** The password should be something that all family members can remember ******

PASSWORD: _____

Swimming Pool Pass Agreements

The undersigned hereby certifies that all persons listed on this application are immediate family members living in the same household and further understands that falsification of this application will result in the termination of the pool pass with no refund. (College students, home for the summer, can be included for family rates.)

I agree to hold harmless the City of New Carlisle, its representatives, volunteers and employees forever from liability for any and all loss or damage, cost or expense, personal injury, property damage or wrongful death arising from swimming at the New Carlisle Pool. I agree to obey the rules and regulations of the New Carlisle Pool and follow instructions of the life guards, management and all other staff. The City of New Carlisle make a reasonable effort to provide a safe swimming pool facility, however, the users of this facility do so at there own risk.

Parent/Guardian Signature: _____ Date: _____

******* APPLICATION MUST BE SIGNED BY A PARENT OR GUARDIAN *******

Office Use:

Rate: _____ Cash: _____ CC: _____ Check#: _____ Date: _____