

Family Pass – 2023
Alfred and Plantagenet Municipal Pool
Registration Form

Pass Number (given by the lifeguard):

	ormation o	n the cardholder
Name:		
Address:		
Date of birth:		
Medical condition(s) or allergi	e(s):	
Emergency Contact:		
Home phone number:		Work phone number:
	Validi	ity Dates
-	•	nming times every day of the week from
June 17 th , 2023 to August 27		•
		pass (other than the cardholder)
Name	Age	Medical condition(s) or allergie(s)
	_	
	_	
	_	
	_	
	_	
		ees
Resident Non-resident		90,00\$ 160,00\$
	e, the cardhold	der must have a residential address from one of the
seven villages that are part of the	ne Township o	of Alfred and Plantagenet (Alfred, Curran, Lefaivre,
Pendleton, Plantagenet, Treadwe		
		ation and Consent
		imming pool of Alfred as well as at the municipal ted to 60 bathers at a time, and are allocated on a
		ummer season, no reservation is necessary to be
admitted to the pool. In the event	t of bad weath	er (heavy rain, thunder, lightning) swimming will be
suspended for a given time for s	afety reasons.	
By signing this form, I certify t	hat all the inf	formation is complete and true.
Signature:		Date:
I agree to be photographe	ed for promo	tional purposes (posters, information leaflets,
website) for the Township of		
	Offic	ce Only
		Employee's initials:
Recaint number:		Payment method: (check/cash/Interas)