

Newtown Crossing Community Association 2024 Pool Registration Form

This form can be submitted to the pool drop box, located on the front gate of the pool, for review. Please use existing tag numbers on paperwork, If you have lost tags, please provide a check (made out to "NCCA" for \$10 per tag—cash is also accepted).

Family Last Name _____ Email address _____

Street Address _____ Newtown, PA 18940

Home Phone _____ Unlisted? Yes No (circle one)

Property Owner _____ Tenant _____ (check one)

Name & Phone# of Emergency Contact (please provide at least 2 contacts)

Please List All Residents Living In the Home

Adults	Work	Cell Phone	Tag No.(pool staff)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Children (1st name,last nameif different from family)	Age	Birth Date (mo/day/yr)	Tag No. (pool staff)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please List All Health Problems For All Family Members

POOL TAGS MUST BE WORN BY ALL MEMBERS TO GAIN ADMITTANCE.

Children under 12 must be accompanied by an adult.