

Newtown Crossing Community Association 2024 Pool Registration Form

Please print clearly • Lost pool tags will be \$10.00/tag for replacement • SAVE YOUR TAGS

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) _____

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

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.**