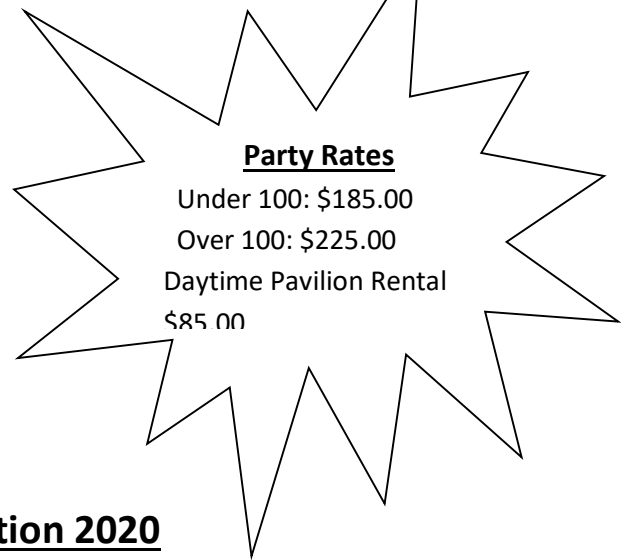


**Middleburg Swimming Pool**  
MIDDLEBURG AREA RECREATION ASSOCIATION, INC.

900 Pratt Lane  
MIDDLEBURG, PA 17842  
TEL. (570)837-3025  
www.middleburgpool.com  
MIDDLEBURGPOOL@GMAIL.COM



**This form must be turned  
in at least 2 weeks before  
the party date.**

**Party Application 2020**

**Parties will be held from 11AM – 1PM, 2PM-4PM OR 7PM-9PM**

NAME OF PARTY: \_\_\_\_\_  
(Business or Last Name)

ADDRESS: \_\_\_\_\_  
(Street) (Apt #)

\_\_\_\_\_  
(City) (State) (Zip Code)

PHONE: ( ) ( ) EMAIL: \_\_\_\_\_  
(Home) (Cell)

PREFERRED WAY OF CONTACT (Please check one): Phone:  Email:

DATE OF PARTY: / / \_\_\_\_\_ EXPECTED PARTY SIZE: \_\_\_\_\_  
(MM/DD/YYYY)

NAME OF PERSON PAYING: \_\_\_\_\_  
(Last Name) (First Name)

**IMPORTANT NOTICE:**

A \$50.00 nonrefundable deposit is required to hold your requested party date. It will be used toward the balance of the party.

**All checks payable to:** Middleburg Community Pool  
With a special notation "Party"

**\*\*\*Payments must be made at time of arrival for party.**



**DO NOT WRITE BELOW THIS LINE- POOL USE ONLY**

**Type of Payment**

CASH:  CHECK:

NAME: \_\_\_\_\_ AMOUNT PAID: \_\_\_\_\_

ENVELOPE NUMBER: \_\_\_\_\_ CHECK NUMBER: \_\_\_\_\_

SIGNATURE OF RETRIEVER OF MONEY: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

1. Acknowledge that I am aware that by entering the premises and participating in the EVENT(S) that there are risks to me and to those with whom I interact of exposure, directly or indirectly, to communicable disease(s) including but not limited to the virus “severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)”, “COVID-19” and/or any mutation or variation.
2. I HEREBY voluntarily agree to RELEASE, WAIVE, DISCHARGE and COVENANT NOT TO SUE on behalf of myself or on behalf of others with whom I interact, the pool manager, assistant managers, senior lifeguard, life guards, office staff, concession stand manager, concession stand workers, other pool patrons, all for the purposes herein referred to as “Releasees”, from all liability to the undersigned, his/her personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefor, whether caused by the negligence of the Releasees or otherwise.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_