TOWN OF NEVERSINK TOWN POOL 2024 SEASON PERMIT APPLICATION

NEVERSINK

NAME(s) Last		First		Age	Tag #
SELF/PARENT'S	NAME				
ADDRESS					
PHONE ()		EMERGEN	CY PHONE ()	<u></u>
Email					
		RESIDENCY INFO	ORMATION		
OWNER:	LOCATION_				
RENTER:	LANDLORD _				
	ADDRESS/LOCATIONPROOF (Rent Receipts, etc.)				
(Some rest	uire with refere rictions apply a s for non-swim	nce to Temporary and an affidavit of	Full Time Re esident hos	esident Gues t required)	
Pool Rules and R	egulations". I (ge that non-cor	(we) understand the	ese regulati	ons and agre	'Town of Neversink ee to abide by them ed pool pass and

SIGNATURE