

2019 Annual Membership Application

Moyaone Community Pool

2311 Bryan Point Road, Accokeek, Maryland
301-292-6321 or rhondaccps@gmail.com (Rhonda Hanson, Manager)

Memberships Categories:

Family: all persons living in a single household during the 2019 swim season

Couple: any two persons living in a single household during the 2019 swim season

Individual: one person 16 years of age or older

Memberships are not transferable.

Swim Team Special Rates

Family: Regular \$500 ☐

Couple: Regular \$405 ☐

Individual: Regular \$285 ☐

Swim Team Family \$425 ☐

Swim Team: 1 adult + 1 child \$350 ☐

Individual: Full membership \$200 ☐

Camp Accokeek participant: \$100-2 weeks + ☐

Day rate \$5.00/day up to 2 weeks

Method of Payment: cash ___ check ___ credit card ___

Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Phones: Day: _____ Evening: _____ Emergency: _____

Email _____

Names of others to be included in membership with ages of children.

Name	Child's Age	Parent's Initials

Children under the age of 12 must be supervised by parent or parent designee. Children must pass the Red Cross Swimming Test to use the deep end. Arrange to have test taken with Pool Manager or guard on duty.

Fees must be paid in full. Make checks payable to The Moyaone Pool and send to P.O. Box 113, Accokeek, MD 20607.

Membership may be paid by credit card at the pool or online at moyaone.org

Payment of \$ _____ is enclosed. I agree to become familiar with and abide by the operating rules and regulations of the pool. I accept responsibility for use of the pool for myself, members of my family, and guests. I acknowledge that failure to comply with these rules may be cause for cancellation of membership in the Moyaone Community Pool.

Signature _____ Date _____