



WISEHAVEN SWIMMING POOL WAITING LIST APPLICATION

2989 East Prospect Road York, PA 17402
717.755.4327 WISEHAVENSWIMMINGPOOL.COM

2025

MEMBERSHIP APPLIES TO IMMEDIATE FAMILY ONLY. PAYMENTS CAN BE MADE BY CASH OR CHECK ONLY.

List all names to be included on membership. If anyone has a different Last Name in the family, please write both first and last name on the application. PAYMENT IN FULL IS REQUIRED FOR MEMBERSHIP.

INDICATE MEMBERSHIP TYPE: INDIVIDUAL FAMILY SENIOR INDIVIDUAL SENIOR FAMILY

Name/		Birthdate/	
Spouse/		Birthdate/	
Address/	City/	State/	Zip Code/
Email/			
Phone 1/		Phone 2/	
Occupation or Place of Employment/			
Emergency Contact/		Phone/	
Child 1/	Birthdate/	Child 4/	Birthdate/
Child 2/	Birthdate/	Child 5/	Birthdate/
Child 3/	Birthdate/	Child 6/	Birthdate/
Grandparent 1/		Grandparent 2/	
Caregiver/			
MEMBER REFERENCE/			

INITIATION FEE: An Initiation Fee is applied to new memberships. This is a non-refundable, one time fee.

Individual Membership - \$250 Family Membership - \$500

INDIVIDUAL MEMBERSHIP: Individual Person - \$500 *13 years of age and up

SENIOR MEMBERSHIP: Individual Senior Person - \$465 Individual Senior & Spouse - \$530

*Must be 62 years of age and up. Only one person needs to be 62 and up to qualify for Senior Parent & Spouse.

FAMILY MEMBERSHIP: Individual Parent - \$500 Individual & Spouse - \$565

1st Child - \$220 2nd Child - \$200 Additional Children - \$180 each *Applies to children 3 and up as of 8/1/25.

FAMILY MEMBERSHIP ADD-ONS: 1 Grandparent - \$260 2 Grandparents - \$325 Family Caregiver - \$300

*Grandparent(s) can only be added to family memberships with at least one child.

Grandparent(s) have full membership privileges and do not need to be with a family member.

*Caregiver must be at least 16 years of age & accompany member 12 years of age or under.

Sign in is required. Caregiver Pass cannot be used alone to enter Wisehaven Pool.

MEMBERSHIP TOTAL
\$ _____

I hereby apply to become a member of Wisehaven Swimming Pool. I agree to abide by all rules and regulations posted on club premises.

FOR OFFICE USE ONLY: Date/		Received By/
Amount Paid/	Payment Type/	Check #/
Notes/		

I promise to RELAX and enjoy my summer at the pool!

Applicant Signature _____

Parent Signature _____

(If applicant is a minor)