

CARD #s _____

CASH/CHECK/CREDIT/ _____

PROOF OF RESIDENCY _____

2025 SWIMMING & PARK ACCESS REGISTRATION
Highland Aquatic Center, Long Pond, West Point, NY

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

DRIVERS LICENSE # AS PROOF OF RESIDENCY: _____

Exclusive for Residents of the T.O.H. or West Point

By accepting this pass, I understand pass entitles the pass holder access to the beach and Long Pond facilities for swimming and recreation. I understand that all rules, on water and on land, must be obeyed at all times and that any infraction of the rules and regulations governing the use of Highland Aquatic Center at Long Pond, West Point, NY shall be cause for refusing this application or revoking the ID cards. I realize that admittance will be granted only if capacity of Long Pond Park allows. Annual Pass/Day Pass does not include water floatation devices, either personal or rental. At infrequent times, part or all of Long Pond & Park may be reserved/rented to a private group function. It will be posted online www.hudsonskyropes.com During these times, access to certain park areas, pavilion, or Long Pond may be temporarily limited. Signatory is responsible for compliance of family or guests.

Date

Signature (must be 18 years of age)

CHECK THE FOLLOWING THAT APPLY:

RESIDENT(Town of Highlands/West Point/Garrison) ____ Adult ____ Senior ____

Family Pass: _____ \$125.00/ family of 5

List names of immediate family members for pool passes and ages of children under 18 years of age:

Name:

Age:

- | | |
|----------|-------|
| 1. _____ | _____ |
| 2. _____ | _____ |
| 3. _____ | _____ |
| 4. _____ | _____ |
| 5. _____ | _____ |

(Additional Family Members at \$20.00 per card)

- | | |
|-----------|-------|
| 1). _____ | _____ |
| 2). _____ | _____ |
| 3). _____ | _____ |