



2009 SEASONAL MEMBERSHIP APPLICATION

(Please print or type)

Date: _____

Name: _____

Address: _____ City: _____

Daytime Phone Number: _____ Evening Phone Number: _____

Cellular Phone Number: _____ E-mail address: _____

SEASONAL RATES

| | |
|------------------------|----------|
| One Person | \$125.00 |
| Two Person Family | \$210.00 |
| Three Person Family | \$290.00 |
| Four Person Family | \$365.00 |
| Each Additional Person | \$ 60.00 |

(Children 2 years and under are admitted at no charge)

Print names as you would like them to appear on passes:

- 1) _____ 4) _____
2) _____ 5) _____
3) _____ 6) _____

Total Payment Enclosed \$ _____ Check # _____

Notes:

- ☉ Guests in the immediate company of Lake members receive a \$1.00 discount off the regular admission rate to the park.
- ☉ Pets are not allowed in the park.
- ☉ Memberships are not transferable.
- ☉ Please make check or money order payable to Cascade Lake, Inc.

P.O Box 616 Hampstead, MD 21074

(410)374-9111/239-4708

www.cascadelake.com