



**Woodloch Springs Sports Complex  
STAFF APPLICATION**

New

Renewal

Name of Applicant: \_\_\_\_\_ Payroll ID # \_\_\_\_\_ Badge # \_\_\_\_\_  
(Couple) \_\_\_\_\_ Badge # \_\_\_\_\_

Identified: \_\_\_\_\_ Badge # \_\_\_\_\_  
Identified: \_\_\_\_\_ Badge # \_\_\_\_\_  
Identified: \_\_\_\_\_ Badge # \_\_\_\_\_  
Identified: \_\_\_\_\_ Badge # \_\_\_\_\_

Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone # \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

**Sports Complex Staff Membership  
6-Month Membership**

Check # \_\_\_\_\_  Amount: \$ \_\_\_\_\_ Member # \_\_\_\_\_

- Single Membership - \$12.50 per paycheck/for 12 paychecks .....\$150
- Couple Membership - \$19.00 per paycheck/for 12 paychecks .....\$225
- Couple Membership with 1 Identified Membership - \$26.50 per paycheck/ for12 paychecks .....\$315
- Couple Membership with 2 Identified Memberships- \$34.00 per paycheck/ for12 paychecks.....\$405

**Annual Membership**

- Single Membership - \$9.50 per paycheck/for 24 paychecks .....\$225
- Couple Membership - \$14.50 per paycheck/for 24 paychecks .....\$350
- Couple Membership with 1 Identified Membership - \$20.00 per paycheck/for 24 paychecks .....\$475
- Couple Membership with 2 Identified Memberships- \$25.00 per paycheck/for 24 paychecks.....\$600

**Membership Terms:**

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

I/we hereby agree to abide by all the rules and policies of Woodloch Springs including in particular any rules governing the use of the Indoor Sports Complex. Woodloch Pines, Inc. reserves the right to revoke my/our membership should I/we fail to adhere to the Community Rules or the rules established for the operation of the Indoor Sports Complex. *I understand my membership does not include the use of the outdoor pool.*

Name \_\_\_\_\_ Name \_\_\_\_\_

*Upon acceptance of your application, all members will be required to obtain an identification pass with photo id at the Complex reception desk*

**Contact the Sports Complex at 570-685-8143 for Membership or Program/Events Information**

Date in FileMaker Pro: \_\_\_\_\_  
Initials: \_\_\_\_\_  
Date Faxed: \_\_\_\_\_