Township of Oxford - Oxford Furnace Lake

2024 SEASON PASS FORM (Page 1)

Oxford Furnace Lake

Open Daily from May 25th, 2024 thru September 2nd, 2024 Hours of Operation: 11:00AM – 6:00PM (weather/conditions permitting)

PLEASE PRINT		
Family / Lead Name:		-
Address:		
City, State, Zip code:		
Phone #:		
Emergency Contact:	Phone #:	
(Name someone outside your immediate family) Email:		

2024 SEASON PASS PRICES (*Check appropriate box*)

NON-OXFORD TOWNSHIP RESIDENTS :	OXFORD TOWNSHIP RESIDENTS:	
*Family (defined as those living in household	*Family (defined as those living in household	
w/same address) \$185	w/ same address) \$145	
Individual (4 - 61 years old) \$85	Individual (4 - 61 years old) \$55	
Senior (62+ years old) \$30	Senior (62+ years old) \$20	

*If FAMILY PASS, please specify full name & age of EACH & ONLY those living in household

w/same address (badge issued to those ages 10+)		OFFICE USE ONLY:
		BADGE #
Name - Adult	Age	
		BADGE #
Name - Adult	Age	
		BADGE #
Name	Age	
		BADGE #
Name	Age	
		BADGE #
Name	Age	
		BADGE #
Name	Age	L

2024 Season Pass Form (Page 2)

NOTICE:

~ <u>Season pass MUST be presented to attendant upon entry to beach</u> ~

~ Season pass is NOT transferable ~

~ Fraudulent use will result in loss of season pass ~

~ Obtaining a season pass will NOT guarantee your entry to the beach area if the volume of

visitors already exceeds the designated safety level ~

~ We regret that we are unable to give any refunds once season begins ~

LIABILITY WAIVER & EMERGENCY MEDICAL AUTHORIZATION

I understand that the activities/programs held within the Township of Oxford, Oxford Furnace Lake may include physical activity and exercise with the possibility of physical contact and bodily injury to myself or my children or ward (if any) listed, and that the Township of Oxford, Oxford Furnace Lake and its staff are not undertaking responsibility to oversee activities that are free from the risk of injury, loss or damage to person or property, and I hereby assume all of said risks for myself and my children and/or wards.

In consideration of the use and availability of the services and facilities, by me and those listed children and wards if any, I hereby agree to release, relieve, hold harmless, and indemnify the Township of Oxford, Oxford Furnace Lake and their respective officers, agents, instructors, and employees from all liability and claims arising out of any accident or injury suffered or incurred by me or said children or wards while enrolled in any class or program sponsored, organized or supervised by Oxford Furnace Lake staff or the Township of Oxford, except for acts of gross negligence or intentional acts of the said officers, agents, instructors, and employees.

Further, in case of accident, injury, or sudden illness, I authorize any first-aid or emergency medical care which may become necessary for my child, ward or myself while enrolled in any activity or program administered by the Township of Oxford. I also authorize that my child, ward, or I may be transported to a local medical facility. If I cannot be reached in an emergency, I hereby grant permission for my child or ward named to receive all appropriate medical treatment necessary. By executing this document, I hereby assume, on behalf of my child or ward, all risk of injury or loss to which he or she may be exposed.

Printed name of Adult, Parent, or Legal Guardian

Signature of Adult, Parent, or Legal Guardian

Date

IF PRIOR TO SEASON OPENING: Mail completed forms & payment to -Township of Oxford Attn: Lake Director 11 Green St. Oxford, NJ 07863

& pick up season badges w/valid photo ID at ticket booth during season/hours of operation.

IF DURING SEASON: Print & complete pages 1&2 to present at ticket booth during hours of operation.

** For any inquiries email lake@oxfordtwpnj.org **

Township of Oxford – Oxford Furnace Lake

2024 Season Pass Method of Payment Form (Page 3)

CASH: \$ ~ in person only, NOT to be mailed
CHECK #: ~ include phone number on check ~ made payable to "Township of Oxford – Lake Account"
CREDIT CARD AUTHORIZATION (We accept MC, Visa, American Express, Discover, Apple/Google Pay) CREDIT CARD HOLDER INFORMATION:
Name (please print):
Address:
City, State, Zip:
Phone #:
Email:
Name on card:
Credit Card #:
Expiration Date:
CVV/security code:
Credit Card to be charged for 2024 Season Pass(es)
AMOUNT TO CHARGE: \$

I authorize the Township of Oxford to charge the credit card indicated in this authorization form to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one-time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company, so long as the transaction corresponds to the amount and terms indicated in this form.

Cardholder's Signature: Date: