APPLICATION FOR TIMBERLIN SEASON PASS - 2015

Unlimited Adult Resident Additional Family member Pass - Fee \$690 (2014 rate)

		-	
		/ /	
Last Name	First Name	Date of Birth	
Street	Town	Zip	Phone
pplicable definitions			
- Two individuals married to each oth	er who have entered into a marriag	je under Connecticu	t law. If surnames are
different, documentation supporting			
- Parent and adult siblings living at the	e same address do not qualify. N	EW	
ELIGIBILITY DECLARATION The Timberlin season pass represe must meet specific criteria to be eligible. I certify that I am a bona fide resident	gible to purchase this pass.		
eligible for this benefit, it will be term may remain.	ninated and I will NOT be reimburse	ed for any residual v	value that
Signature		Date	
Olynature	5	Date	
If documentation is provided, ide	ntify below and attach copy		
Approved by	Date		
Notes:			