



PARKS & RECREATION

Town of LaGrange Parks & Recreation Department

120 Stringham Road
LaGrangeville, NY 12540
845-452-1972 www.lagrangeny.gov



Changing Lives...Inspiring Play...Fostering Teamwork!

2020 FREEDOM LAKE MEMBERSHIP APPLICATION

Applications must be submitted to the Recreation Office in person.

Mail-ins not accepted.

Last Name:
Town of Residency (circle one):
LaGrange Beekman East Fishkill
Pleasant Valley Poughkeepsie (town)
Union Vale Wappinger

First Name Age
[Blank lines for name and age entry]

Street Address
Mailing Address (if different from street address):
Email Address
I would like to receive updates from Parks & Rec:
(We do not share email addresses) Y N
Phone #

Fees: Register by 5/1/20 and deduct \$5.00 from the following rates:
Table with columns: Eligible, Resident, Non-Resident
Rows: Individual, Family of 2, Family of 3, Family of 4, Each additional family member, Seniors age 62 and over, Children 2 and under, 10% off Active Duty Military with valid Military ID

Annual proof of residency: Lake passes are offered to LaGrange residents or eligible non-residents from the following border towns: Beekman, East Fishkill, Pleasant Valley, Poughkeepsie (town), Union Vale and Wappinger. Proof of residency is required in two forms-photo ID and tax or utility bill.
Definition of family or household: A household is a family with up to 2 parents and their unmarried children under 24 years of age living permanently in the residence: if there are multiple generations living at the same residence, each must purchase their own pass/program registration. If a family membership is purchased it is for a family as defined above and no other individuals.
Guest policy: Season pass holders and daily admission purchasers (age 18 and up) may bring in up to four paying guests per day. You must be staying at the beach with your guests.
You must be at least 15 years of age to purchase a lake pass.

I understand that the Town of LaGrange Parks and Recreation Department reserves the right to close Freedom Lake on any given day for weather or other circumstances. We make every effort for full operating hours.
Member's signature

Office Use Only
Date: ID Provided Pass #
Policy/Rules Rec'd
Amt: Cash Check Cr/Dr
Issued by