

City of Grosse Pointe Woods Application for 2023-2025 Resident Parks & Recreation Passes

- 1. To apply for a park pass:
 - Visit the Community Center, 20025 Mack Plaza. Business hours, 8:30 a.m. 5 p.m. Monday Friday. Click here for extended hours.
 - Complete the form below. All family members residing in the household must be listed.
 - Residents eight years of age or older are eligible for park passes.
 - Once application is approved, updated photos of eligible residents will be taken and passes will be printed.
 - I.D. must be shown to receive park passes.
- 2. The City of Grosse Pointe Woods reserves the right to request verification of each resident in the household. Proof of residency:
 - Adults Driver's license or Michigan I.D. with GPW address.
 - Children Birth certificate, school report card, or proof of guardianship.
- 3. Rental properties must have a current Certificate of Occupancy on file with the Building Department.
- 4. Guest privileges:
 - Residents under 18 years of age are allowed one guest daily.
 - Residents over 18 years of age are allowed two guests daily.
- 5. Lost park passes are replaced through adult application only, at a cost of \$20. Stolen park passes may be replaced free of charge if a police report is provided. Damaged passes may be exchanged for a new pass free of charge.
- 6. Passes are non-transferable. Misuse or change in eligibility status may result in suspension or cancellation of park pass.
- 7. Change in residency may result in a cancellation of park pass.
- 8. New passes expire December 31, 2025, and are required year-round for entry to the park and the Activities Building.

For clarification of park pass procedures, call (313) 343-2408 on weekdays 8:30 a.m. - 5 p.m.

2023-2025 Resident Application for Parks & Recreation Passes **Street Number Street Name** Have you previously received passes at this address? □ No, however I received passes at a different GPW address_ □ Yes \square No **Primary Phone** E-mail Address Do you want to be added to the "Grosse Pointe Woods Happenings" weekly e-blast? □ Yes □ No, I already receive the "Happenings" \square No **Emergency Contact (other household)** Relationship **Primary Phone Secondary Phone**

Full Name of Each Resident	Date of Birth	Age	M/F	Cell Phone
1,				
2				
3				
4				
- T.				
6.				
5				