

Pocono Mountain School District

Gold Card Club

Application



Name: _____

Street or PO Box: _____

City: _____ State: _____ Zip: _____

Township: _____

Phone Number: _____

Birthdate: _____

Resident of District: _____ Occupation: _____
No. of Years

Signature: _____ Date: _____

The Gold Card may not be used for school plays or musicals, due to the cost involved in these programs.

Please complete and return to:

Gold Card Club
Pocono Mountain School District
Office of the Superintendent
PO Box 200
135 Pocono Mountain School Road
Swiftwater, PA 18370-0200