



2018 POOL INDIVIDUAL 10 SESSION PASS APPLICATION

Name: _____ Home Phone: _____
Address: _____ Cell Phone: _____
City: _____ State: _____ Zip: _____

Circle one of the following

Individual 10 sessions - \$15 4-7 yrs. \$25 8 yrs. and older

Replacing lost or stolen cards is \$5/ card

Pass #	Print Name	Signature	Age	Circle one Male Female
_____ 1	_____	_____	_____	

I agree that the only people allowed to use this pass are the names listed above. This process is non-refundable.

Failure to follow pool rules or listen to city staff - results in termination of pass or pool use.

Name: _____ Date: _____ Temporary Card Exp. Date: _____

OFFICE USE ONLY:	Cash: _____	Check: _____	Card: _____
Sold By: _____	Date: _____		