



SWIM PASS APPLICATION
Valid September 9 – November 30, 2019
 (Closed November 28-30)

Name of Adult/Parent/Guardian _____ Birth Date of Adult/Parent _____

Address _____ E-mail Address _____

City, State, Zip _____

Day Phone _____ Mobile _____ Evening _____

<u>SWIM PASS</u>	<u>RESIDENT</u>	<u>NON-RESIDENT</u>
Child (17 & under)	<input type="checkbox"/> \$25	<input type="checkbox"/> \$30
Adult Pass	<input type="checkbox"/> \$40	<input type="checkbox"/> \$48
Family Pass	<input type="checkbox"/> \$70	<input type="checkbox"/> \$83
Senior (55+)	<input type="checkbox"/> \$31	<input type="checkbox"/> \$37

Complete below for Family Swim Pass - List Immediate Family Only!
 (MOTHER, FATHER and CHILDREN who live in your home. In-laws & extended family members **do not** qualify.)
 There is a limit of 6 household members per family swim pass. Additional members are \$10.00 each.
 A list of pass holders will be kept at the pool.

<u>First Name</u>	<u>Last Name (if different)</u>	<u>Age</u>	<u>Birth Date</u>	<u>Grade</u>	<u>M/F</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

ADULT SIGNATURE REQUIRED!

I hereby understand that I/or my child has registered to participate in a program sponsored by the Menomonee Falls Community Education & Recreation Dept. I understand that participating in this activity has some inherent risk and I assume full responsibility for injuries incurred while participating in this program. I understand that photos may be taken of myself or my child and used for promotional purposes.
 PLEASE NOTIFY US IF YOU OR YOUR CHILD HAS ANY SPECIAL MEDICAL CONDITIONS OR NEEDS.

Adult/Parent Signature _____ **Date** _____