



**SWIM PASS APPLICATION**  
**Summer Pass Valid June 15 – August 15, 2020**  
 (Closed July 3, 4 and 6)

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 Pass (3 - 17)	<input type="checkbox"/> \$25	<input type="checkbox"/> \$30
Adult Pass (18+)	<input type="checkbox"/> \$40	<input type="checkbox"/> \$48
Senior (55+)	<input type="checkbox"/> \$31	<input type="checkbox"/> \$37
Family Pass	<input type="checkbox"/> \$70	<input type="checkbox"/> \$83

**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** \_\_\_\_\_