



2018 Season Pass Application

Membership Rates

Student	\$95	<input type="checkbox"/>
Adult	\$115	<input type="checkbox"/>
Family	\$165	<input type="checkbox"/>
Family w/caregiver	\$185	<input type="checkbox"/>

No refunds issued.

Family Pass Eligibility

"Family" is defined as all immediate family members, including full-time college students, stepchildren, adopted children, foster children, foreign exchange students and grandchildren **permanently** residing at the same address. It does not include babysitters or visiting relatives (sons, daughters, cousins, grandchildren, grandparents, etc.) In order to participate in a family membership, such persons must be claimed as a dependent to the IRS by the person making the application for membership.

Caregiver Pass Eligibility

"Caregiver" is defined as an individual age 14 years or older who will be attending the aquatic facility with your child(ren). The caregiver need not be related. Only one caregiver per family membership is permitted and must be purchased in conjunction with a family membership.

Membership Form

ADDRESS OF PASS HOLDER(S)		
CITY	STATE	ZIP
HOME PHONE	CELL PHONE	
WORK PHONE	EMAIL ADDRESS	

FIRST & LAST NAMES

1.
2.
3.
4.
5.
6.
CAREGIVER:

Agreement

I, the undersigned parent, guardian or participant, do hereby attest that the information given here is true, and agree to allow the individuals(s) named here to attend the Fairmont Aquatic Park and I further agree to indemnify and hold the City of Fairmont, Fairmont Aquatic Park Facility, Aquatic Park management team and staff harmless from and against any and all liability for injury or loss of property by the aforementioned individual(s) arising out of, or in any way connected with, his/her participation at the facility.

I, the undersigned parent, guardian or participant, understand that this season pass will be null and void if this application is falsified and the season pass fee will be forfeited.

signature

FOR OFFICE USE ONLY

Payment method: Cash Check Credit Card

Date paid: _____

Place a check mark next to each name if their data has been verified

Date entered into system _____ By _____

Thank you for your support!
See you this summer!