

Pool Season Pass Registration

Youth (age 3-17)	\$45
Adult	\$60
Family (up to 4 members)	\$125
Each addl. family member	\$15

NAME(S): _____

_____ Date of Birth

ADDRESS: _____

PHONE: _____

LIABILITY RELEASE:

I agree to waive and release all claims I may have against the Richmond Department of Parks and Recreation and its offices, agents, and employees that I may incur as a result of my participation in the above program(s) of the Richmond Department of Parks and Recreation. I further agree to indemnify and hold harmless the Richmond Department of Parks and Recreation and its officers, agents, and employees from all claims resulting from injuries, damages and loses sustained by me or others as a result of my participation in said program(s) on property of the Richmond Department of Parks and Recreation.

Signature: _____ Date _____

FOR OFFICE USE ONLY

Date Paid: _____

Amount Collected: _____

Received By: _____

Card Number: _____