2022 GLENWOOD AQUATIC CENTER MEMBERSHIP REGISTRATION FORM

	Member Name(s)	DOB		Member Name(s)	DOB
1.			5.		
2.			6.		
3.			7.		
4.			8.		

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3.				7.						
4.				8.						
•	ı	F INTERESTE	D IN E-PASS	SES PLEASE	PROVIDE EMAIL A	ADDRESS(S):		·		
		Respon	ISIBLE PARTY	/EMERGENC	CONTACT INFORM	IATION				
Name					CELL PHONE					
			Mı	EMBERSHIP O	PTIONS					
Au	L MEMBERS MUST PROVID	E THEIR NAME	, DATE OF BII	RTH AND THE	R PICTURE MUST BE	TAKEN BEFORE A PA	SS CAN BE	RECEIVED		
	G ROUPS LIMITED	TO 8 PEOPLE	PER MEMBER	RSHIP, ONLY	3 ADULTS (18 & O	LDER) ON EACH GROU	JP PASS.			
		= Pre-K - 12	TH GRADE	ADULT = 18	8 years+ Senior Citizen = 62 years+					
	MEMBERSHIP OPTIONS	RATE	QTY	TOTAL		BERSHIP OPTIONS	RATE	QTY	TOTAL	
1 STUDENT/1 ADULT		\$130			Adult		\$75			
2 ADULTS		\$145			Senior Citizen		\$65			
2 SENIOR CITIZENS		\$115			STUDENTS		\$65			
3 Members		\$155			DISCOUNTS:					
4 Members		• YMCA (active) Members \$10 Discount on Individ Pass/\$15 Discount on group pass								
5 Members		\$195		*Must show proof of active status*						
6 Members		\$215	• MILITARY (ACTIVE, RETIRED, VETERAN) \$20 DISCOU						NT OFF GROUP	
7 Members		\$235			Pass — must show proof of status					
8 Members		\$255 CITY OF GLENWOOD EMPLOYEES, ACTIVE LAW ENFORCE FIREFIGHTERS, OR EMS \$20 DISCOUNT OFF GROUP PAR								
SubTotal:		I I			receive an Adult Pass for \$65 * Must work in Mills County and provide proof*					
DISCOUNT APPLIED:		TOTAL DUE:								
I CERT	IFY THAT HAVE RECE	IVED AND RE	AD THE G L	enwood A	AQUATIC C ENTER	RULES & MEMB	BERSHIP (CARD PO	DLICY	
Name:			Signa	TURE:	Date:					
RESPONSIBL										
MAK	e checks payable to C ity (OF GLENWOOD	~ DEBIT/CRI	EDIT CARDS A	CCEPTED. CONTACT (CITY HALL 5 N. VINF:	(712) 5	27-4717	OR	
	<u> </u>				OR PAYMENT PLAN O	_	\- = -, •.	· ·· -·		
				Official Use	ONLY					
MEMBERSHIP NUMBER:			Дате	Paid:			Ілт	:		

CARD NUMBERS ASSIGNED: