

2021 Sidney Aquatic Center Season Pass Purchase Form



NO REFUNDS

The Sidney Aquatic Center will open for the 2021 summer season on Saturday, May 29 — August 8, 2021. Purchase season passes at the Sidney City Offices located at 1115 13th Ave. from 8:00 a.m. to 5:00 p.m., Mon. thru Fri. or at the Aquatic Center after the season begins. Cash, check or credit card accepted.

PAYOR (individual purchasing pass)

Name _____ Phone _____

Type of Pass	Type	Cost Tax incl.	* Other	Quantity	Add 3% for credit card	Total
	Child (0 to 5) *	\$52				
	Youth (6 to 18) *	\$68				
	Family *	\$164				
	Adult	\$99	n/a			
	Senior (60+)	\$52	n/a			
					TOTAL	
* Reduced fees may be available for those who qualify with children. See Pool Manager or City Hall staff.						
<p>FAMILY PASSES: Family pool passes are: 1) for immediate family members living in the household; or 2) for grandparents who may purchase a family pass for themselves and one household of grandchildren.</p> <p>Immediate family is defined as mother and/or father, children and stepchildren living in one household (children must be 18 and under). Unmarried children, 19-23, may be on the family membership only if the child is a full-time student or is in the military with proper college or military ID. Foster children or other children under the legal guardianship of a member may be added to a family membership by providing a copy of the official court documents awarding the member custody of the child.</p> <p>Each family member's name and birthday will be on the season pass.</p> <p>DISCLAIMER: I understand that if I misrepresent who is a family member of the household on this pass, I will forfeit my rights, money and pass privileges for the current season. INITIAL: _____</p>						

RESPONSIBLE PARTY (individual responsible for members on the pass)

I understand that I (or family members) must comply with all rules and regulations of the Sidney Aquatic Center. I am aware that admission to the Aquatic Center is only by use of my membership card or payment of a daily fee.

Printed Name _____ Signature _____

Address _____ Phone _____

Names	Name(s) of all individuals on pass:					*DOB required for pass
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	
	_____	Gender _____	DOB* _____	Age _____	Relation _____	

Official City Use Only

Cash Check CC Amount \$ _____ Purchase Date _____ Initials _____