



City of Terrell

Pool Season Pass Application

Type of pass:

_____	Patrons over 4 years old	\$35.00	_____
_____	Family (up to 4)	\$75.00	_____
_____	Additional Family Member(s)	\$25.00	_____

Total: _____

Applicant Information:

Applicants Name: _____

Applicants Address: _____

Applicants Phone No.: _____

List Each Family Member Names & Ages:

_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____

**RETURN COMPLETED APPLICATION & PAYMENT TO THE TERRELL MUNICIPAL SWIMMING POOL
MAKE CHECKS PAYABLE TO: CITY OF TERRELL**

For Office Use Only:

Method of Payment: Cash Check Other _____

Clerk: _____

Receipt No: _____

Date: _____