

# CITY OF ROMAN FOREST

## Family Pool Pass Application – SUMMER 2023

Family Summer Pool Pass is \$200.00 and include up to 4 people in the same household. Additional members in the same household are \$20/each.

Name: \_\_\_\_\_ Spouse \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Name and Phone Number of Emergency Contact: \_\_\_\_\_

Swimmers (4 Members):

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Additional Swimmers \$20/each: 1. \_\_\_\_\_ age \_\_\_\_\_

2. \_\_\_\_\_ age \_\_\_\_\_

3. \_\_\_\_\_ age \_\_\_\_\_

4. \_\_\_\_\_ age \_\_\_\_\_

Only **family members** listed may be admitted under this pool pass. Misuse of this pass or any pool rules may be cause for revoke of membership.

I understand and have a copy of the pool rules for the Roman Forest Community Pool.

Failure to comply with these rules may result in revoking pool privileges.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

-----Do Not Write Below This Line (for office use only)-----

Amount Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card \_\_\_\_\_ Rec'd by \_\_\_\_\_ Date \_\_\_\_\_

Assigned Family Membership Number: \_\_\_\_\_

Membership No. recorded ☐

Notes: \_\_\_\_\_