

Lennox Community Pool

Parks and Recreation * 107 S. Main St. PO Box 228 * PH: 605-647-2286 * Fax: 605-647-2281 * www.cityoflennoxsd.com

Pool Pass Registration

Office Use Only	
Recvd Date	_____
Approved By	_____
Total	_____
Cash	_____
Check #	_____
Receipt #	_____

Family Last Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Email: _____
 Home Phone: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact: _____ **Phone:** _____ **Relationship:** _____

Type of Pass	Fees	# of Passes	Total
Individual Season Pass	\$50		
Family Season Pass	\$100		
Daily Pass (child)	\$3		
Daily Pass (Senior)	\$4		
Daily Pass (Adult)	\$5		

***Family Members** include one set of parents, and their children residing in the same household.
 If more than one family resides in the household, each family must purchase a separate Season Pass.
 Babysitters, grandparents, extended family members and others are not included in the Family Season Pass.

Family Season Pass

First and Last Name	Date of Birth	Age	Relationship

Waiver for Participation

I hereby waive and release any and all rights and claims for damages I or my child(ren) may have against the City of Lennox, City of Lennox Parks and Recreation Department and its representatives and assigns for any and all injuries suffered by myself and/or my child(ren) on any activity sponsored by these groups.

Signature: _____ Date: _____