

Swimming Pool Season Ticket Registration Form

Your Details

| | |
|---------------|--------|
| Name: | |
| Address: | |
| Phone Number: | Email: |

Ticket Type

Single

Family
(2 adults and 2 children under 18)

Additional child under 18
Number required: _____

Full Season

Half Season

If you are purchasing a family pass, please fill out the below with the details of those to be included on the pass.

| | Name | DOB | Male/Female |
|---------|------|-----|-------------|
| Adult 1 | | | |
| Adult 2 | | | |
| Child 1 | | | |
| Child 2 | | | |
| Child 3 | | | |
| Child 4 | | | |
| Child 5 | | | |
| Child 6 | | | |

I confirm that the above information is correct and I agree to abide by the terms and conditions of entry to the Narromine/Trangie swimming pool and all instructions given by pool staff.

Name: _____ **Sign:** _____ **Date:** _____

ADMIN USE ONLY

Amount Paid: _____

Method of Payment: Cash Eftpos Cheque

Receipt Number: _____

Pool location: Narromine Trangie

Season Ticket Number: _____

Date of entry: _____

Staff name: _____

Staff signature: _____