

AMSLER PARK AQUATIC CENTER SEASON PASS



NAME OF RESPONSIBLE PARTY: \_\_\_\_\_

NAME OF SEASON PASS HOLDER: \_\_\_\_\_

PHONE # \_\_\_\_\_ TEXT?  YES  NO

EMAIL \_\_\_\_\_

**Fees:**

Season Pass  \$50

Replacement of Season Pass  \$5

Please email photo of season pass holder to [TheExchange@McGregor-Texas.com](mailto:TheExchange@McGregor-Texas.com)

Responsible Party Signature: \_\_\_\_\_

(Sign and Date)

Balance Paid: \_\_\_\_\_