

**Lockport Community Pool  
Summer 2019  
Individual Pass**

Name \_\_\_\_\_

Address \_\_\_\_\_

Date Purchased \_\_\_\_\_

*I understand that with the purchase of this pass, the admission of myself ONLY is covered upon entering the Lockport Community Pool. If I choose to bring others, they must pay as a general swimmer. With the purchase of my **Individual Season Pass**, I understand that I may enter and use the pool during normal posted open swim hours. If I choose to attend a family swim, only my pass covers MY admission. I further acknowledge that with the purchase of this pass, I must still adhere to all pool rules and regulations as administered and enforced by the lifeguards and pool supervisors on duty. I understand that the cost of my pass is \$80.00. I also understand that the unpredictability of the weather may result in premature closing of the pool or in the pool remaining unopened.*

Signed \_\_\_\_\_

Date \_\_\_\_\_

Pool Supervisor \_\_\_\_\_

Date \_\_\_\_\_

Paid (amount) \_\_\_\_\_

Cash

Check