



**City of Delphos
2022
Season Pool Pass
Christmas Special
\$35.00**

Name: _____

Address: _____

City: _____ Phone: _____

Please circle one: Adult Student Pass No. _____

Emergency Name and Contact Number: _____

I hereby certify that the above information is true and correct to the best of my knowledge. I also understand that I must follow all rules and staff and failure to do so could result in loss of swimming privileges.

Signature: _____