

Brookton Aquatic Centre

2024-25 SEASON PASS ENROLMENT FORM



SINGLE PASS \$50.00 FAMILY PASS \$150.00

NAME: _____

PARENT/GUARDIAN (IF UNDER 18 YEARS): _____

CONTACT DETAILS: HOME: _____ MOBILE: _____

ADDRESS: _____

EMAIL: _____

SEASON PASS HOLDER NAMES 2024-2025		
ADULTS		
1.		
2.		
CHILDREN (OVER 5 YEARS AND UNDER 18 YEARS)		AGE
1.		
2.		
3.		
4.		
5.		
6.		

ANY RELEVANT MEDICAL INFORMATION FOR POOL STAFF TO BE AWARE OF? _____

SIGNATURE: _____ DATE: _____

OFFICE USE ONLY:

RECEIPT #: _____ DATE: _____

AUTHORISING OFFICER: _____

Pass Number #: _____ ENTERED: _____