Tonopah Memorial Swimming Pool
Business Season Pass
Up to 20 Employees 16 Years and Older Per Pass

Name of Business: _____

Name of Business Owner or Representative: _____

Contact Phone Number: _____

Small Business Season Pass $75.00 ☐
(Up to 10 employees)

Large Business Season Pass $150.00 ☐
(11-20 Employees)

List the name, age, emergency contact information and any additional information our staff should be aware of for each employee to be included on the Business Season Pass. You may write an "A" for the age of employees over 18 years of age. Please list the exact age of employees under the age of 18.

Employee Name	Age	Emergency Contact Name	Emergency Contact Phone Number	Additional Information

I hereby certify that the above listed individuals are current employees of the business listed on this form and the information provided above is corect to the best of my knowledge.

_____
Plesae print Full Name

_____ _____
Signature Date

DO NOT WRITE BELOW THIS LINE FOR OFFICIAL USE ONLY

Date Received:_____ Received By:_____

Payment Amount:_____ Payment Type:_____ (Check/Cash/CC) Ref No.:_____