

# Goodman Pool Season Pass & Lesson Registration

## Head of Household Information

In exchange for the privilege of using these facilities, I agree that I will be liable to and hold harmless the city of Madison and its officers and officials, agents and employees against all loss or expense including attorney's fees by reason of any claim or suit, or the liability imposed by law upon the city or its agents or employees for damages because of bodily injury including death at any time resulting wherefrom, sustained by any person or persons or on account or damages to property, including loss of use thereof, arising from, in connection with, caused by or resulting from my act or omission in attending and using these facilities, whether caused by or contributed to by the City or its agents or employees.

**Name** \_\_\_\_\_  
 First \_\_\_\_\_ Last \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Address** \_\_\_\_\_  
 Street \_\_\_\_\_ City/State/Zip \_\_\_\_\_

**Phone** \_\_\_\_\_  
 Home \_\_\_\_\_ Cell \_\_\_\_\_

**E-mail** \_\_\_\_\_

Signature \_\_\_\_\_  
 required for participation

**Confirmation:** Goodman Pool staff will mail or e-mail a receipt/confirmation of your season pass and/or lesson enrollment.

**Season Pass** \_\_\_\_\_ Family Season Pass (fill out names below) \_\_\_\_\_ Adult Season Pass \_\_\_\_\_ Youth Season Pass \_\_\_\_\_ Senior Season Pass \_\_\_\_\_

Season Pass or Lesson Name of Participant	Date of Birth	Lesson Session Dates	Lesson Class Name	Lesson Class Time	Lesson Course Number	Lesson Second Choice

Please note that Family Season with over 6 people in the family require an additional \$20 per person. Please attach registration sheet if needed.

\_\_\_\_\_ I am requesting a full or partial scholarship. I have read the scholarship regulations and attached a supporting letter (required).

Make Checks payable to  
 City Treasurer  
 Mail to: Goodman Pool  
 325 Olin Ave.  
 Madison, WI 53713

Charge my MasterCard or VISA account:  
 Card # \_\_\_\_\_ Expires: \_\_\_\_\_  
 Authorizing Signature \_\_\_\_\_

### Total Fees

Season Pass \_\_\_\_\_  
 Lessons \_\_\_\_\_  
 Donation to Pool Scholarship Fund. \_\_\_\_\_  
 Total Fees \_\_\_\_\_