## Victoria Public Pool Rates and Season Pass Application 2024

	Season Pass	
Individual Pass	\$150	
Family Pass**(4)	\$275	Additional \$25.00 per member

## DAILY POOL ADMISSION

Walk-ins (General Public) \* Hours: Mon-Sun 11:00AM 5:00PM **Daily Pass \$10.00** 

\*Season Pass Exclusive Hours Only\* Hours: Mon-Sat: 9-11AM & 5-7PM Sun: 5-7 PM

\*Children ages 3 and under FREE and they also must be accompanied by an adult \*

2025 Season Pool Pass Application (Season: May 25- Sept 2)					
	Individual		☐ Family	·· _/	
NAME:					
STREET ADDRESS:		CITY:	ST	ATE: <u>VA</u> ZIP:	
PHONE:		_ E-MAIL:			
Please list all household in First Name	members to be included on pas <u>Last Name</u>	ss (if names are not o	n the pass, daily rates	will be charged):	
1			□ M □ F Age:	(if under 22 years old)	
2				(if under 22 years old)	
3				(if under 22 years old)	
4			□M □F Age: _	(if under 22 years old)	
**5				(if under 22 years old)	
**6			□ M □ F Age:	(if under 22 years old)	
Please mak	e checks payable to: To	wn of Victoria	P.O. Box 1421, Vi	ctoria, VA 23974	
Family pass: A FAMILY / children, age 22 and over an in families over four memb NOTE: If a Family pass hol absence at no extra charge. (	derson from the age of 12 and use Household is identified as parent(s) dother relatives or individuals in the core; only exception *Children and der has someone that babysits their \$25 extra person fee does apply we opriate daily pass rate. The babysis	s) and unmarried childr the household are requi ges 3 and under FREI ir children, the sitter is when requesting season	red to purchase their own E and must be accompand permitted to bring the chipass). However, if the particular is the particular in the par	pass. **\$25.00 extra per person nied by an adult.  Idren to the pool in the parent's rent is present, the sitter is your	
further understands that fals the summer, can be include forever from liability for any at the Victoria Public Pool.	rtifies that all persons listed on thi sification of this application will res d for family rates.) I agree to hold and all loss or damage, cost or ex I agree to obey the rules and regu staff. The Town of Victoria makes	sult in the termination o I harmless the Town of opense, personal injury Ulations of the Victoria I	diate family members livi f the pool pass with no re Victoria, its representati , property damage or wro Public Pool and follow ins	orfund. (College students, home for ves, volunteers and employees ongful death arising from swimming	
Parent/Guardian Signature:			Date:		
** APPLICATION MU	JST BE SIGNED BY A PAR	RENT OR GUARD	IAN **		
Office use:	• • • • • • • • • • • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	
Rate:	Cash:	Check #			
Date:					