

**City of Roman Forest**  
**2430 Roman Forest Boulevard**  
**Roman Forest, TX 77357**

**Family Pool Pass**

Roman Forest Resident \_\_\_\_\_ Non Resident \_\_\_\_\_

Family Membership Number: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_

Summer Passes are \$160.00.

Family Pass Prices include up to 4 people in a family. Each additional member will be an additional \$20.

Name: \_\_\_\_\_ Spouse \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Office \_\_\_\_\_

Name and Phone Number of Emergency Contact: \_\_\_\_\_

Swimmers (4 Members for \$160.00):

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Additional Swimmers (family): 1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

Only **family members** listed may be admitted under this pool pass. Misuse of this pass or any pool rules may be cause for dismissal of membership.

I understand and have a copy of the pool rules for the Roman Forest Community Pool. Failure to comply with these rules may result in suspension from the pool.

\_\_\_\_\_

Applicants Signature

\_\_\_\_\_

Date