

A GREAT PLACE TO CALL HOME

CLERK'S OFFICE - PHONE 712-668-2231 • FAX 712-668-2531 205 WEST 2nd STREET, P.O. BOX 433, ODEBOLT, IOWA 51458

Family Pool Pass- Season ticket price is \$85.00 (max 6 family). Additional family members in one living residence can be added at \$15.00. Single pass this season only is \$40. Each person over 6 in family pass can be added to pass for \$15.00 each. Age 6 & under need adult or sitter 14 yrs old and stay with the child in water! Daily ticket prices are \$3.00.

Names:	
Pool R	
1.	No swimming alone
2.	No floating devices except in baby pool & only with parent/guardian supervision.
3.	Bikes are to be put in racks, not on the sidewalk, park or roadway
4.	No littering in park or pool area- Use the garbage.
	No running on the deck
	No spitting .
	No alcoholic beverages in pool or park area
	No smoking or chewing in the pool
	No obscene language
	No fire works
	No glass bottles
12.	Shower off before swimming
13.	No kids in the pool alone if under 6 years of age and not completed kindergarten OR if the guard judges them to
	be unsafe without guardian. Police will be called if they cannot verify their parents address & phone number.
	No diving into shallow water
15.	No rough play of any kind
16.	No walking on the wall dividing the baby pool and three foot area
17.	No flotation devices; no cut offs or frayed shorts
18.	No gum or candy in the pool area
19.	No jumping backwards, butt dives
20.	No throwing other swimmers
21.	No jumping or diving off ladders
22.	No walking in the gutters
23.	No cars blocking the emergency entrance
24.	Everyone entering the pool must sign in- <u>names will be checked to verify if the person has a ticket</u> (unless the perso
	pays on a daily basis). And Must have emergency contact name and number as well.
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	is a few biological and anyone except in very serious cases or persistent
1.	daily rule breakers.
2	to the second se
3 4	in the parents will be
4	polled
5	the police should be called
ن	668-2221
By sig	ning this you agree to the above rules and will share them with children if on your pass.
C:	ture Parent or Guardian:
Emer	gency Phone Number: Work #:
Work	Name: Wolk #