



Bay Minette Municipal Pool Complex Membership Form

Please print:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Cell: _____

Employer: _____ Employer Phone: _____

Membership Type:

Inside 36507 Zip Code

Individual -\$175 _____ Senior/Couple -\$225 _____ Family -\$300 _____

Outside 36507 Zip Code

Individual -\$200 _____ Senior/Couple-\$250 _____ Family -\$325 _____

**Plus One option allows for babysitter/grandparent. Only one name allowed per season and no substitutions will be permitted once membership form is submitted.*

For Couple or Family Membership: (legal spouse and children 19-years or younger) please list family members below:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

*Plus One: _____ Age: _____

I acknowledge that I have received a copy of the City of Bay Minette Municipal Pool Rules and understand the rules and regulations and agree to abide by the same.

Member Signature

Date

Amount Paid: _____ Date: _____

Payment Received(Cash, Check) _____

Received by: _____