



Pool Pass Application

7701 Boca Ciega Drive
 St. Pete Beach, FL 33706
 Web Site: www.spbrec.com

Telephone: (727) 363-9245
 Fax: (727) 363-9246
 E-Mail: recreation@stpetebeach.org

Date of Application: _____ Last Name: _____ First Name: _____

Mailing Address: _____
 (City) (St) (Zip)

E-Mail Address: _____ Date of Birth: _____

Home Phone #: _____ Cell Phone #: _____ Work Phone #: _____

Emergency Contact: _____ Phone #: _____
 Home Work or cell phone

Applicant Signature: _____ **Date:** _____

Other Family Members (If Applicable)

Name (Please print clearly)	Relationship	Date of Birth	Sex

Pool Pass Options

Pool Pass	Fee	Number Purchased
Youth/Senior 6 month	\$ 80.25	
Youth/Senior 1 year	\$ 144.45	
Adult 6 month	\$ 107.00	
Adult 1 year	\$ 192.60	
Family 6 month	\$ 267.50	
Family 1 year	\$ 481.50	
Additional Family Member – 6 month	\$ 16.05	
Additional Family Member – 1 year	\$ 10.70	
Non-Resident Pool Card Fee – Youth/Senior	\$ 21.40	
Non-Resident Pool Card Fee – Adult	\$ 26.75	
Non-Resident Pool Card Fee – Family	\$ 53.50	
Total Paid to City	\$	

STAFF USE ONLY

Two Proofs of Residency required, picture I.D. Preferred Circle those viewed: FL Driver's License, FL Identification Card, Voter's Registration, Library Card, Electric/Phone/Utility Bill, Mortgage/ Deed, Lease, Post Marked Mail with patrons name & address

Receipt #: _____ **Employee Initials:** _____