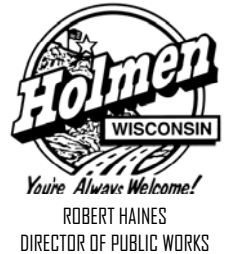


JOHN CHAPMAN
VILLAGE PRESIDENT
CATHERINE SCHMIT
ADMINISTRATOR / CLERK
KAREN SPREUER
VILLAGE TREASURER
MICHAEL BROGAN
PARK & RECREATION DIRECTOR

VILLAGE OF HOLMEN
PARK & RECREATION DEPARTMENT
421 S. Main Street
P.O. Box 158
Holmen, Wisconsin 54636-0158
(608) 526-2152



Holmen Area Aquatic Center
Group Rate Form

Please note the following requirements for group rates:

- 30 or more people are considered a group.
- Anyone using a personal membership will not be counted as part of the group.
- The group will not enter the pool before 1:30 during the week (Monday – Friday).
- One representative of the group must come to the pool building to check in and get wristbands.
- No groups on Saturdays or Sundays.
- Group rates are designed for non-residents. Group rates are \$2.00/person.

Group name _____

Contact person _____

Address _____

City _____ State _____ Zip Code _____

Phone number (____) _____ - _____

Planned date of attendance _____

Number of people in-group _____ x \$2.00/person

= _____ TOTAL

Other _____

Signature: _____

Village Authorization Signature: _____

The Village of Holmen must receive the group rate form at least 3 days prior to the attendance date. Please mail or bring this form to the Holmen Village Hall, Main Office, 421 S. Main Street in Holmen or to the pool (315 Anderson St., when open). If you have further questions, please call (608) 526-2152.