



# Antioch Water Park Group Pass Form

4701 Lone Tree way  
(925) 776-3070

Customer Information			
First Name	Last Name	Date of Birth	
Address	City	State	Zip Code
Phone	Email Address		
Emergency Contact Name	Relationship	Phone Number	

Organization Information (if applicable)			
Name:		Phone:	
Address	City	State	Zip Code

Visit Information		
Date	Day of the Week	# of People Attending

Group Pass Set Up			
Total # Children:		Weekdays: \$11/person Weekends: \$14/person (based on dates listed above)	\$
Total # Adults:			

All attendees over 30" tall must be counted toward group pass, including those not swimming.	<b>Fees are due 7 days before visit.</b>	Total Amount Due \$ _____
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