



Application for Pool Pass at GFHS



Pass Number: _____ (Office Use Only)

Members of the Great Falls Public Schools Employee Wellness Swimming Pool Pass, will be admitted to the Great Falls High Pool during designated hours. To be eligible for an Employee Wellness Swimming Pool Pass, you must be an Employee of the Great Falls School District. Please complete the following.

Name: _____ Date of Birth: _____

Address: _____ Zip Code: _____

Phone Number: _____ Date of Application: _____

Building Employed Through: _____

In accepting the Great Falls Public Schools Employee Wellness Swimming Pool Pass, I understand that the card issued is non-transferable and only to be used by me.

Signature

Please send, fax, or email applications to Central Reception in the District Office Building.
Please put attention to Kim Fadrhonc.

Mailing Address:
Great Falls Public Schools
P.O. Box 2429
Great Falls, MT 59403

Fax Number:
(406) 268-6067

Email:
kim_fadrhonc@gfps.k12.mt.us