POOL PERMISSION SLIP FOR MINORS
Warm Springs Cabana Club

Child's Name / Age:

Parent/Guardian Name:

Emergency Contact Name / Phone:

Permission Statement: (effective from the date of signing through November 14, 2026)
I hereby grant permission for my child, named above, to use the swimming pool facilities at Warm Springs Cabana Club, located at 251 Goldenrain Ave, Fremont, CA 94539.
Parent/Guardian Signature:

_____ **Date:** _____

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This form must be completed and on file at the Warm Springs Cabana Club for any minor member who will be using the pool facility.