



City of Goodland
204 W. 11th St.
P.O. Box 59
Goodland, KS 67735

Phone: 785-890-4500
Fax: 785-890-4532
Website: www.goodlandks.gov

Steever Water Park

(785) 890-4565

APPLICATION FOR 2024 SEASON PASS

Date: _____

_____ Individual (5yrs to Adult) \$55

_____ Family (Immediate, up to 4 persons) \$100
Each Additional \$15

NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

IMMEDIATE FAMILY MEMBERS:

_____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

I understand that the City is not responsible for any accidents or injuries, which may occur on the premises. This application creates no contractual rights in the applicant or pass holder. I further understand that this season pass is non-refundable and non-transferable.

Signature: (if under 18, legal guardian must sign)

Office Use ONLY: _____ paid _____ approved by