CITY OF REXBURG
America's Family Community

Submit

Rexburg Rapids Recreation Benefit Punch Pass Registration Form

City Employee's Name: _____

Department: _____

Email Address (Use email from prior year's purchases): _____

Please complete the following information for the recreation benefit family member:

10 Punch Pass **with slide** ($63.00) ☐ 10 Punch Pass **without slide** ($49.50) ☐

Recreation Benefit Family Member's Name:_____

Birth Date: _____ Gender: Male ☐ Female ☐

Address: _____ Address line 2: _____

City: _____ State: _____

Postal Code: _____ Phone: _____

*Punch pass expires at the **end of the season** and may be used for more than one person at a time.

Download and complete **BEFORE** clicking submit

For Questions Call: 208-359-3020
Send To: mattn@rexburg.org

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