



Pre-Natal Pool Pass

_____ authorizes _____
(Provider) (Mother to Be)

to participate at Catawba Valley Medical Center's Fitness Plus.
This pass entitles you to use the pool throughout your pregnancy for \$3 per visit.

Delivery/Expire Date ____/____/____ Fitness Staff Initial: _____

Visit www.catawbavalleymedical.org/fitness-plus for hours of operation and class schedules. Located in the lower level of the Center for Rehabilitation.

Guest must sign guest waiver and present Pass at each visit.

Phone: 828.326.3680 | 810 Fairgrove Church Rd SE, Hickory, NC 28602