



MUNICIPAL SWIMMING POOL RENTAL APPLICATION

NAME OR ORGANIZATION: _____

*Responsible Party: _____

Address: _____

Home Phone: _____ Mobile Phone: _____

Requested Date of Use: _____ Hours From: _____ To: _____
Month/Day/Year

_____ Approximate number of Swimmers (So we can have required number of Lifeguards)

Purpose of Use: _____

The undersigned has read the attached rules and regulations for the rental and use of the Graham Municipal Swimming Pool facility and fully understands and agrees to be personally responsible for any damages or losses to the pool area, restrooms or furniture. It is understood that no more than actual repair or replacement cost will be charged and any such amounts shall become due and payable upon receipt.

Responsible Party: _____ Date: _____

***Copy of Drivers License is Required**

Rental Fees: ▶ *Deposit: \$50* ▶ *Pool Rental: \$150 per two-hour party up to 30 Swimmers*
▶ *Pool Rental: \$175 per two-hour party 31–50 Swimmers*
▶ *Pool Rental: \$200 per two-hour party 50+ Swimmers*

***It is very important that you book for the correct number of swimmers, you will not be able to add additional swimmers at the party! Guard numbers will be based on what you book.**

For Office Use Only

_____ + _____ = Total Fees Received: _____
Deposit Pool Rental

City of Graham Representative: _____ Date: _____

Kris Corbett, Pool Manager, Cell: 970-406-0818