



AQUATIC CENTER PARTY APPLICATION

Name of Applicant: _____

Address of Applicant: _____

Applicant Contact Phone#: _____

Date of Application: _____

Date of Party Requested: _____

***Note:** The applicant's name on this form is responsible for all aspects of the Pool Party including payment at least seven (7) days prior to the date selected. Application must be returned to and fees paid at Clarendon City Hall at 313 S. Sully Street, between the hours of 8 a.m. and 5 p.m. Monday through Friday (except Holidays).

PARTY TIMES AVAILABLE:

Sunday & Tuesday through Thursday from 8 p.m. until 10 p.m., Parties will be scheduled on a first-come first-serve basis.

PRICING:

\$125.00 per hour. In the event of inclement weather, another available date can be rescheduled or a refund will be issued. No gate collection is allowed for parties. An additional cleaning deposit of \$100.00 is required, this deposit shall be returned only if the pool area is cleaned immediately after the party.

POOL PARTY RULES:

(1) No outside food or drinks (except Birthday cake and ice cream)

GENERAL POOL RULES:

- (1) No metal grommets on suits are allowed. Suits must be approved by Management.
- (2) Individuals using the pool must wear swim suits. No cutoffs, gym shorts, etc.. are allowed. No shoes in pool area.

- (3) No glass containers in pool area or changing areas.
- (4) No running, pushing or horseplay in pool area or changing areas.
Please be courteous to all guests.
- (5) Diving is only allowed in designated deepwater areas.
- (6) Children age 12 and under must be accompanied by a parent or guardian.
- (7) Children in diapers are not allowed in the main pool.
- (8) No gum, food, drinks or smoking will be allowed in the pool area or changing areas.
- (9) Only authorized personnel will be allowed in the pool office area.
- (10) No sitting or hanging on the safety lines.
- (11) Individuals wearing eye glasses in the pool must have them properly secured with an approved head strap.
- (12) Face masks and goggles are not allowed in the pool without approval of the pool manager or assistant manager.
- (13) Individuals with open sores, contagious diseases, infections or bandages will not be allowed in the pool.
- (14) All persons using the pool must take a thorough shower with soap before swimming and after using toilet facilities.
- (15) Please be courteous to all users of the Clarendon Aquatic facility.

The City of Clarendon reserves the right to revoke the use of the Aquatic Center by individuals who violate the rules and regulations of the Aquatic Center.

The City of Clarendon reserves the right to close the Aquatic Center due to inclement weather or low attendance at any time.

NOTICE: The City of Clarendon does not accept responsibility for injury to a person or damage to property of participants or spectators resulting from activities held in this area.

If you have any questions or concerns please call Clarendon City Hall at (806) 874-3438.

By signature I agree to abide by the rules established for the Clarendon Aquatic Center.

Signed: _____ Date: _____

Deposit received by _____ check _____ cash _____

Deposit refunded on _____ Amount _____

Applicant signature _____

Clerk signature _____