



Milam Pool Group Rental Application Form

RECEIPT # _____

Organization Name: _____ Sponsor/Contact: _____

Address: _____ Phone #: _____

Number of Attendees (Youth): _____ Age Range: _____ Number of Supervisors/Counselors: _____

Days of Week (Mon.-Sun.): _____ Date(s) Requested: _____

Time: _____ Fee Amount Paid: _____

Note: Sponsor agrees to pay for all Attendees at the gate who are above the number stated on this signed agreement. (Youth @ \$2.00 each) (Adult @ \$3.00 each)

Group Policy:

Groups of 10 or more must have a reservation to assure adequate supervision and prevent overcrowding of the pool. Signature of the authorized group representative and the Clarkston City Manager will be required for this agreement to be valid. **Failure to comply will result in termination of Group Swim Agreement.**

- Youth groups (day cares, camps, etc.) must have a 1 to 10 ratio of supervisors/counselors to youth
- If there are children under age 5 in the group, the ratio of supervisor/counselor to youth must be 1 to 6
- Groups must sign an agreement:
 - Come at scheduled time only
 - Adhere to staff/child ratios
 - Provide general supervision of youth
 - Provide supervision of group belongings
 - Comply with all pool rules
 - Non-swimming counselors are not allowed in water over five feet deep

This agreement will authorize admission on the following date(s) and time(s) only:

This agreement will authorize admission for a total of _____ patrons only.

Sponsor's Signature

Date

City Manager, Keith Barker Signature

Date

City Seal Required