



Pool Rental Form

Frances Meadows Aquatic and Community Center

Booking Inquiry Form VSI # _____

Event Name: _____

Contact Name: _____ Phone #: _____

Cell #: _____ Fax #: _____

Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Date of Visit: _____ Day: _____ Time: _____

Pool Rental Choices: Splash Zone I Splash Zone II
Instructional Pool Competitive Pool All Pools Amount: \$ _____

Board Action Item Required: Yes. Date of Meeting: _____ No

Total Number in Rental: _____ Guaranteed Number: _____ (2 days out

Age Groups: ___ Under 1 ___ 2-9 ___ 10-17 ___ 18-60 ___ 60+

Food Options: Caterer: _____ Concession Stand

RATE: The projected amount for the above leased premises shall be \$ _____

Half of the projected amount (\$ _____) is to be paid at initial scheduling scheduling of the event on _____, and the remaining amount is to be paid seven days prior to the event on _____.

The full projected (\$ _____) amount is to be paid at initial scheduling of event, on _____ due to the booking occurring within 14 days of the event date.

PLEASE SUBMIT TO: Shelia Curry; Senior Customer Service Representative
Fax: 770-533-9164 Phone: 770-533-5862 Email: scurry@gainesvillega.gov