

Main Office: 1105 Canterbury Drive Hays, KS 67601 (785) 623-2650 Fax: (785) 623-2657 www.haysrec.org hrc@haysrec.org



HAYS AQUATIC PARK/WILSON POOL RENTAL FORM

HAYS AQUATIC PARK

NEW PRICES

6:45 - 8:45pm \$750.00 500 max in attendance will be enforced!

Paid: Cash _____ Check ____ Credit Card ___

Staff Signature: ____

_____ Date: ___

SWIMMING POOL RENTAL FEES

All fees must be paid for in ADVANCE in order to reserve your time! No exceptions!

WILSON POOL

NEW PRICES

5:00 - 7:00pm \$125.00

60 max in attendance will be enforced!

Name of Contact Per	rson:				
Organization/Busine	ss name if applicable: _				
Address:					
City:		State:	_ Zip:	E-mail:	
Home #: (Cell #:		Work #:	
Location Desired: _	Hays Aquatic Park	Wilson Pool	Attendan	nce Expected:	
Date Desired:		Circle da	y of the we	eek: M T W Th F Sat. Sun.	
✓ Request for Pool Rent Aquatics Director. Sp more information ✓ Reservations are on a ✓ Once Maximum cap Weather Information: No a decision by the contact time for a refund to be iss the right to cancel a party If weather is in question v Director at 785-639-1730	FIRST COME-FIRST SER pacity for parties has been to refunds will be made after person listed on the contract sued. After 6:45pm/5:00pm at any time due to weather, we will make every effort to 0 to check on the status of d and agree to the dates, to	eeks in advance of the sord, but will be subject to a LVE basis, with Hays Recreached it will be one for 6:45pm for HAP or at and or the Aquatics Dia any weather cancellation. If you have questions it contact you at the above fryour party! -PLEASE Stimes and locations sta	repproval of the creation Commin and one of 5:00pm for Warector to hold in will result in regards to the numbers, BU	rity. Any exceptions will be subject to review by the ne Aquatics Director. Please contact the HRC office is mission activities taking first priority. Dut for the remainder of the rental. Wilson - the day of the event. If weather is in question the party must be made prior to the 6:45pm/5:00pm in no refund. The Aquatics Director and or Manager is the weather policy please contact the Aquatics Director. UT it is your responsibility to contact Aquatics.	or n na or.
				will be sent to the contact person. Above checked location, as stated below.	
Signature			Date		
Total amount for D1.D.		FOR STAFF USE		Director Signature:	
Total amount for Pool Re	:11tai				

Place in Schedule Book:

Confirmation Letter Sent:

Called Pool: