

**WAILUNA RECREATION ASSOCIATION
SWIM CLUB RESERVATION FORM**

The undersigned (hereafter referred to as Host), a resident of Apt./Lot No. _____ of () Wailuna, () The Heights, () The Crest, (), requests the exclusive use of the Swim Club picnic area on _____ 2020, from 3.00 p.m. until 10.00 p.m. I have read and understand the rules governing the use of the WAILUNA RECREATION FACILITIES and agree to comply with them. I will be responsible for the safety and conduct of all my guests. I also agree to be responsible for any costs incurred to repair damages that may be caused by my guests or me. Party guests are not authorized to enter the building before, or remain after, the conclusion of the party.

I understand this reservation:

- ❖ Authorizes me to have up to 35 guests.
- ❖ Requires me to provide easy access to the restrooms, pool & spa to all facility users. Is only for the use of the tables and benches area and does not include the pool and spa.
- ❖ Requires me to employ a lifeguard if I desire to use the pool or spa.
- ❖ Does not allow any fund raising or commercial venture activity at the facility.
- ❖ Does not allow the use of Karaoke Machines.
- ❖ Water balloons are not allowed.
- ❖ Baptisms are not allowed.
- ❖ The Tot Lot is not included.

The Host may call Security at 282 7299 any time after 3.00 p.m. and have the kitchen opened for him. The host will remain at the facility for the duration of the party and will not depart until checkout has been completed with the Security Office, using the Memorandum form.

✓ If the pool or spa is to be used, the lifeguard will be responsible for the safety of all bathers and enforce the WRA Rules relating to the use of the Swimming Pool (i.e. no running, shouting, diving or splashing). A copy of the lifeguard's certification is required upon submission of the application. A list of lifeguard names is on the Board. The deposit will be returned, if the building, restrooms, furniture, BBQ grill and trash containers are clean and undamaged. The host is required to ensure that all food, beverages and trash are picked up and removed from the site. (Please do not use glass bottles or containers).

Please make checks payable to: Wailuna Recreation Association.

No. of persons attending: _____

Date of function _____

Resident's Name: _____ Signature _____

Phone number: _____

Lifeguard's Name: _____

User Fees: Gas BBQ (\$10.00) []