

# Bruce Buchanan Memorial Aquatic Center Rental Contract 2022

Date: \_\_\_\_\_ Name: \_\_\_\_\_  
Phone:(Cell) \_\_\_\_\_ (Hm or wk) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Two people to help clean up: 1. \_\_\_\_\_  
2. \_\_\_\_\_

**Date(s) Requested: \_\_\_\_\_ Time: \_\_\_\_\_ to \_\_\_\_\_ Number in group: \_\_\_\_\_**

**Full Facility - Prices are for the first hour, each added hour is the rate plus \$30  
Every person in the rental group, swimming or not, is counted for the facility fee.**

Under 30 people in facility	\$100
30-59 people in facility	\$130
60-89 people in facility	\$160
90-119 people in facility	\$190
120-149 people in facility	\$220
150-179 people in facility	\$250

**Lap Pool Rental - Prices are per hour and a certified program supervisor is required.**

Under 30 swimmers	\$65
30-59 swimmers	\$85
60-89 swimmers	\$110
90-119 swimmers	\$135
120-149 swimmers	\$160
150-179 swimmers	\$185

SAC STAFF PERSONNEL:

1. \_\_\_\_\_ 3. \_\_\_\_\_ 5. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_ 6. \_\_\_\_\_

I understand and am aware that the use of the BBMAC Aquatic Center facility and programs involves risks and potential hazards. In consideration of participation in the BBMAC Aquatic Center programs and/or use of the facilities, I, \_\_\_\_\_, individually for myself, my heirs and assigns, and as a parent or guardian for any minor under the age of 18 included within this agreement, hereby release and hold harmless BBMAC Aquatic Center, its employees, agents, directors, and owners from any claims, demands or causes of action arising from the use of BBMAC Aquatic Center facilities or participation in BBMAC Aquatic Center programs.

**I ACKNOWLEDGE THAT A 50% DEPOSIT IS REQUIRED TO HOLD OUR DATE AND TIME AND PAYMENT IN FULL IS DUE ON \_\_\_\_\_ (10 DAYS PRIOR TO THE DAY OF THE RENTAL).**

Signature of Rental Contact Person: \_\_\_\_\_ Date: \_\_\_\_\_  
BBMAC Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\$ \_\_\_\_\_ /hour x \_\_\_\_\_ hours = \$ \_\_\_\_\_ Extra hour fee: \_\_\_\_\_ Rental Fee Total \_\_\_\_\_  
Non-Refundable Deposit 50% of rental fee \$ \_\_\_\_\_ Collected On: \_\_\_\_\_ Staff Initials: \_\_\_\_\_  
Total Due \_\_\_\_\_ DATE DUE: \_\_\_\_\_ Date Paid \_\_\_\_\_ Initial \_\_\_\_\_

Updated 6/19/2022