



# Margaret M. Clark Aquatic Center

## Facility Request 2023-2024



Date(s): \_\_\_\_\_

Name of Sponsor: \_\_\_\_\_ Campus/Department: \_\_\_\_\_

Name of lead contact at event: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Event \_\_\_\_\_ Date of Event \_\_\_\_\_

Purpose of Event \_\_\_\_\_

Beginning Time \_\_\_\_\_ Ending Time \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Number of Adults \_\_\_\_\_

Number of Adults Supervising Locker Rooms \_\_\_\_\_

Number of Adults in the Water (if pre-K - 1<sup>st</sup> graders in water) \_\_\_\_\_

Specific Accommodations \_\_\_\_\_

Area Requested: \_\_\_\_\_ Competitive Pool  
\_\_\_\_\_ Adaptive Pool  
\_\_\_\_\_ Classroom  
\_\_\_\_\_ Weight Room  
\_\_\_\_\_ Concession Stand  
\_\_\_\_\_ Courtyard  
\_\_\_\_\_ Bleachers

Please indicate any other specific requests: \_\_\_\_\_

**FACILITY USE FEE: \$200**

**\*No hired DJs or outside toys allowed inside the facility \***

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

**\*Please understand this is not a guaranteed date based on how the school year evolves. We will make every effort to honor your request or make an adjustment.**

For Office Use Only:

Received on: \_\_\_\_\_

Approved Y / N

By: \_\_\_\_\_