



Margaret M. Clark Aquatic Center

Facility Request 2022-2023



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 - 1st 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: _____