

Party Information Sheet

Are you a member of the Wylie Swim Club?

YES NO

Contact Name	Date o	Date of Party:		_ Time of Party		
Monday, T	Subject to date & uesday, Thursday - y & Saturday - 10:00	llowing Party Dates & time slot availability) 10:00am-Noon or 8:00-10 5:30-7:30pm	00-10:00pm			
Phone Number	Email					
Type of Party		<u> </u>				
Number of Attendees: (Circle One)	less than 40	41-80				
WSC Member prices* Non-WSC Member Prices* Local Church Groups* *Prices for a 2-hour party. Please note that adhering to the 2-h	\$200.00 \$300.00 \$200.00	\$275.00	egin nrenaring	for one	ning (or	
closing) the pool. Thank you for you		iows our stair to be	zgiii prepariiig	тог орс	iiiig (oi	
A \$50.00 deposit is required to reser deposit. The A refundable damage deposi *Please make checks payable to "W I understand that I am responsible f Note to those parties privat private swim club we do not ha up to the lifeguard or her/his er Please note that all guests a entering the party. Signature of responsible host Food may be brought in for a part of the party of the party of the party. If you need to use the on-site g We have limited refrigerator or there are 8 picnic tables at the	remainder balance of the state of \$100.00 will be saying Club", and state of the welfare and selly hiring their owner AED's, backboard mployer to provide the tage 12 and over welfare; no glass containing the prepare food, of freezer space for your freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, of freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or freezer space for your fill to prepare food, or	may be paid at the ting of required for all paid if mailed, please add donduct of my gurn lifeguard(s): We also or lifeguard floats. Hem. If the required to sainers or alcohol. The there is an addition	ne of the party. parties of over dress to 7474 Bu ests. NO LIF e provide a lifeguard ign a Waiver of	40 parti uffalo Gap EGUAR uard chai requires	icipants. p Rd, 79606. RD is provided ir. However, as these items, it ity before	
		ce Use Only				
\$50 Deposit Date Paid	Charge Ca	ash Check#				
\$100 Damage Deposit (if applicable)	_			<u>.</u>		
Name of Person that paid:	Rem	aining Balance Due: 9	\$			
Marked on Party Calendar? YES				YES	NO	
WSC Staff Name	Notes:					
 Remaining Balance \$		aid				
Circle One: Charge Cash	Check#	Staff Nam	e			