

WATERFORD POOL PARTY FORM

POOL MEMBER _____

PARTY FOR _____

DATE _____ TIME _____ To _____

EXPECTED NUMBER OF GUESTS _____

WHO WILL PAY FOR NON-MEMBER GUESTS _____ MEMBER _____ GUESTS

FORM MUST BE TURNED INTO ADKINS PROPERTY MANAGEMENT PRIOR TO 1 WEEK BEFORE PARTY OR YOU MAY BE CHARGED FOR EXTR LIFE GAURDS.

	Guest Name	Waterford Pool Member	Fee	Arrived	Paid
1		Y / N			
2		Y / N			
3		Y / N			
4		Y / N			
5		Y / N			
6		Y / N			
7		Y / N			
8		Y / N			
9		Y / N			
10		Y / N			
11		Y / N			
12		Y / N			
TOTAL					

I have read and agree to all Waterford Swim & Racquet Clun Rules (rev. 1/10/2018) and agree to take full responsibility for all guests present.

Sign Date

Print Name

Adkins Property Management Approval Date