



Bexley Swimming Centre
98 C Preddys Rd Bexley
Ph 9150 4594 Fax 9554 4890

Lane Space Booking Form

Day(s) Required:

- Monday Tuesday Wednesday
 Thursday Friday Saturday Sunday

Reoccurrence:

- Weekly Monthly
 Fortnightly Annually

Actual dates required:

Time Required:

Start time: _____ Finish time: _____

Lanes Required:

- Outdoor 50m Pool _____ Lanes required
 Outdoor 50m Pool _____ Lanes required
 Teaching Pool
 Side Lanes (if avail.) Lane ropes Open (no lane ropes)

Attendances:

Total numbers: _____ Numbers of supervising staff _____

Will attendees be buying from the kiosk?

- No Yes Approx. times: _____ to _____

Equipment:

- Tables _____ Number (1 to 4) Umbrellas _____ Number (1 to 4)
 Chairs _____ Number (1 to 12)

Your Checklist:

- Risk Assessment read & agreed to Conditions of Hire read & agreed to
 Emergency Procedure read & agreed to Name: _____
 Copy of insurance & qualifications attached Signed: _____