

**Buncombe County Schools Aquatics Center
Facility Request Form**

*Application is only good for one fiscal year (July 1-June 30)
REFER TO EXHIBIT B FOR A BREAKDOWN OF CHARGES*

Name of User _____ Purpose _____

Name of Organization _____

Contact Name _____ Phone _____ Fax _____

Address _____

Email _____

COMPLETED BY USER GROUP

Date(s) and Time(s) of Rental	No. of Lanes Requested or Full Pool	Number of Participants

Attach a second page if needed

Group Category:

- ☐ A – School use by Buncombe County/Asheville City Schools Swim Teams for practice. Buncombe County Government emergency use for safety training.
- ☐ B – YMCA (swim team for practice and swim meets; youth swim programs), Buncombe County/Asheville City Schools Swim Teams (swim meets) and other Buncombe County/Asheville City School groups.
- ☐ C – Events run by a non-profit or non-Buncombe County/Asheville City public schools' entity.
- ☐ D – Non-educational events (private pool parties, camps, or swim clubs) or any event run by a for-profit company.

☐ **CURRENT CERTIFICATE OF LIABILITY INSURANCE ATTACHED.** A Certificate of Liability Insurance is required for all user groups. \$1,000,000 for General Liability coverage with \$5,000 medical payment endorsements is required. **The Certificate of Liability Insurance document must show Buncombe County Board of Education, 175 Bingham Road, Asheville NC 28806 as the certificate holder, and as additional insured.**

☐ **ARMED SECURITY REQUIRED** (to be paid by user group directly to officers)

☐ **CUSTODIAN NEEDED** (after regular business hours)-*3 hr. minimum at \$30 per hour to be charged to the user group.*

**Fee Schedules can be found in Exhibit B
For Office Use Only (To be completed by YMCA Staff)**

AMOUNT TO BE CHARGED:

- ☐ Facility Fee \$ _____
- ☐ Custodial Fee \$ _____
- ☐ Other \$ _____

Make Check Payable to YMCA

AMOUNT TO BE CHARGED:

- ☐ Lifeguard Fee \$ _____
- ☐ Timing System Setup \$ _____
- ☐ Timing System Operator \$ _____

TOTAL AMOUNT DUE \$ _____

Date Payment Received _____

SUBMITTAL OF FACILITY REQUEST FORM: All facility request forms must be submitted a minimum of fifteen (15) days in advance of requested rental date(s). Facility request forms can be completed and submitted on the YMCA website at ymcawnc.org/form/buncombe-county-schools-aquatic. All facility, lifeguard, and or other fees will be invoiced at the end of the month by the YMCA of WNC. Check(s) or facility request form(s) can be mailed to the following address.

YMCA of Western North Carolina
Attn: YMCA Business Center
40 North Merrimon Avenue, Ste. 301
Asheville, NC 28801

CANCELLATIONS: Written cancellations received at least seven (7) days prior to the event will not be charged. Cancellations received two (2) to seven (7) days prior to the event will be invoiced for 20 percent of rental fee(s). Cancellations received less than 48 hours prior to the event will be invoiced for 25 percent of rental fee(s). Reservations for rental of the Aquatics Center may be cancelled without notice by BCS/YMCA for emergency shutdowns of the Center (e.g. – mechanical issues or weather) and/or for rescheduled BCS events and in this instance any appropriate refund will be issued.

RETURNED CHECKS: In the event that any check presented as payment of fees for use of the aquatic center is dishonored for any reason (including non-sufficient funds or account closure), continued use of the Aquatics Center will be cancelled, unless satisfactory payment can be made within 48 hours of notification. Payment after a dishonored check must be in cash or money order form and must cover any fees incurred by BCS or the YMCA because of the dishonored check.

By signing below, I agree that I have read, understand, and will abide by this agreement, the Buncombe County Facility use policies and procedures, and the Regulations Governing the Buncombe County Schools Aquatics Center. I also understand that a \$30 per hour fee is charged for custodial services outside normal hours. Final approval from the YMCA representative along with prompt payment of fees is required for use of the aquatic facility. Donations are **not accepted** in lieu of facility use payments. By signing below, I also understand that I am expected to be honest when filling out this application. I understand that any false statements made on this form may, at the sole option of Buncombe County Schools and the YMCA, result in revocation of permission to use the aquatic facility, and the inability of me and/or my organization to use the aquatic facility in the future.

Requester Printed Name

Date

Requester Signature

Date

YMCA Representative

Date

FOR OFFICE USE ONLY

CHECK LIST

- ☐ The user group will submit a check to the YMCA within 14 days of receiving invoice for rental of Aquatics Center.
- ☐ Certificate of Liability Insurance attached.
- ☐ Does the Certificate of Liability insurance show Buncombe County Board of Education as the certificate holder and as additional insured? Must also include the address of 175 Bingham Road, Asheville 28806
- ☐ Form filled out and signed by requester and YMCA representative. It is very important that the dates the user group needs the facilities are on the form with each date recorded separately. This will help with calculating the total amount due for facility use. Make sure times of use are also recorded for each date used. Use a second page if needed.
- ☐ Facility use fee not applicable
- ☐ Dates of use do not overlap into the next fiscal year. A new application must be filled out for each fiscal year and fees paid.

When application is complete and user fees have been determined by the YMCA, one check should be submitted to the YMCA.
(Revised 07/08/2021)