

KINGSPORT AQUATIC CENTER

1820 Meadowview Parkway, Kingsport, TN 37660

LONG COURSE POOL RENTAL APPLICATION

Contact Information

Contact Person: _____	Email: _____
Address: _____	City: _____
State: _____ Zip: _____	Phone: _____

Meet Rental Information

Event Name: _____ Date(s): _____ 2nd Date: _____ Approx. # of Participants: _____	Set-Up Date: _____ Estimated Set-Up Time: _____ <b style="color: red;">Daily Arrival Times Personnel: _____ Spectators/Swimmers: _____ Warm-Up Time: _____	<b style="color: blue;">Meet Start Times <b style="color: blue;">Day 1/Session 1 Start Time: _____ End Time: _____ <b style="color: blue;">Day 2/Session 2 Start Time: _____ End Time: _____
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Pools and Rooms Requested

Please indicate below what each amenity will be used for.

	Competition	Warm-Up		Vendor	Hospitality	Other/Indicate
Competition Pool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Large Conference Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warm Pool-Indoor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Classroom #1 (Mid-Pool)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/> Classroom #2 (Diving End)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pool Configuration/Set-Up

The following is the equipment that will be set-up for each meet.

Starting Blocks Bulkhead <input type="checkbox"/> Deep End <input type="checkbox"/> Shallow End Touch Pads <input type="checkbox"/> Finish End Only <input type="checkbox"/> Both Ends Number of Back-Up Buttons (per lane) <input type="checkbox"/> 1 <input type="checkbox"/> 2	Starter <input type="checkbox"/> Finish End Only <input type="checkbox"/> Both Ends Diving Events <input type="checkbox"/> 1 Meter <input type="checkbox"/> 3 Meter PA System <input type="checkbox"/> Yes <input type="checkbox"/> No
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Additional Information, Rules, Release and Indemnification Agreement

Reservation Reminders

The Renter must provide a Certificate of Insurance naming the City of Kingsport and the Kingsport Aquatic Center, Inc as Additional Insureds. Coverage must meet or exceed \$1,000,000.00 per occurrence OR Renter's insurance is subject to the reasonable approval of the facility Team/Athlete/Entry Count report & session reports must be submitted to Kingsport Aquatic Center within 14 days (weekends included) of the entry deadline. If you intend to bring in any vendors to the facility (t-shirts, photographers, etc), you must notify the facility at least 3 days before the event so that setup location and tables/chairs can be arranged. All facility rules apply to renters and vendors.

Fees & Billing

Bills will be calculated on the first of the month for rentals occurring in the preceding month. The City of Kingsport will send bills on the 15th of the month with Payment due by the 30th of said month. Cancellation or rescheduling requests within 30 days (weekends included) or fewer of the rental date will be charged full price for the slot unless a new renter can be found. Exceptions may be considered for unexpected mechanical pool closures and weather-related events. Delinquent invoices may result in future meets being removed from the calendar. **Fees may be subject to change beginning July 1, 2022.**

Special Provisions:

Spectator will not be allowed outside food or beverages. Concessions are available for guests. Renter must advise all vendors and participants of this policy. Stadium seats with backs are not recommended in the gallery for spectators. Chairs (bag chairs, etc.) will not be allowed in the gallery for spectators unless needed for ADA compliance.

Please read and sign below:

I, the undersigned, on behalf of the Renter, hereby apply to reserve a designated area in the Kingsport Aquatic Center facility for the purpose as specified on this rental agreement. Renter agrees to abide by (and cause its event participants, spectators, and vendors to abide by) all of the applicable rules, regulations, and policies of the Aquatic Center, and Kingsport Aquatic Center as its Manager, and any and all rules or regulations posted at the facility and/or provided to Renter (or the Contact Person listed above). In addition, Renter hereby takes full responsibility for all persons who will be associated with the scheduled event and said reservation. Renter waives and releases the facility (Kingsport Aquatic Center) and the City of Kingsport and their employees and agents from all claims, liabilities, and damages for personal injury or property damage to any event participant, vendor, or spectator for Renter's event, arising out of or relating whatsoever in any manner as a result of the scheduled event. In addition, Renter understands and agrees that Renter will be held financially responsible for any costs associated with the loss or damage of Kingsport Aquatic Center property.

Office Use Only

Scheduled By: _____	Date: _____	Staff Signature: _____
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Rental Prices	
Type of Rental	Fees
Whole Pool Full- (May 1- May 20) *12 hours include 1 hour set up and 1 hour break down for KAC Staff	\$2,500.00/day
Whole Pool Half Day-(May 20-July 31) *5 hours include 1 hour set up and 1 hour break down for KAC Staff	\$2,750.00/day
Half Pool Full Day-(May 1-May 20) *12 hours include 1 hour set up and 1 hour break down for KAC Staff	\$1,500.00/day
Additional Charges	
*Rentals lasting longer than above rental time will be charged an extra per hour overtime limit	\$100.00/hour
Palmer center Warm Water Pool *only available during (May 20-July 31). No half day rentals	\$600.00/day

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