



Pool Party Information Sheet

Event Information

Event Name: _____ Purpose: _____

Event Date: M T W Th F Sat Sun _____ Time: _____ to _____

of People: Adults _____ Children _____

Party Contact Person Information

Primary Party Contact Person: _____ Phone: _____

Address: _____ Email: _____

Secondary Party Contact Person: _____ Phone: _____

Address: _____ Email: _____

Party Planning Information

Equipment Required:

Additional Instructions/Comments:

Lifeguard Information

Number of guards Needed: _____ Party WMFC Game Master Assigned: _____

Names of Guards Assigned: _____

Comments