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**Aquatic Booking Details Report**

Hirers Name: \_\_\_\_\_

School / Group Name: \_\_\_\_\_

Contact Phone number: \_\_\_\_\_ Mobile number: \_\_\_\_\_

Email address: \_\_\_\_\_

Type of Booking Requirements *(please tick)*

<p><b>External Lane Hire</b></p> <p><input type="checkbox"/> Number of lanes required _____</p> <p><input type="checkbox"/> Equipment required _____</p> <p>_____</p> <p>_____</p> <p><b>School Sport (no instructor)</b></p> <p><input type="checkbox"/> Number of lanes _____</p> <p><input type="checkbox"/> Equipment requirements _____</p> <p>_____</p> <p>_____</p> <p><b>School Swimming Carnival</b></p> <p><input type="checkbox"/> Whole pool</p> <p><input type="checkbox"/> Half pool</p>	<p><b>School Sport (instructor)</b></p> <p><input type="checkbox"/> Water polo</p> <p>    <input type="checkbox"/> With goals</p> <p>    <input type="checkbox"/> Without goals</p> <p>    <input type="checkbox"/> Other equipment</p> <p><input type="checkbox"/> Aqua Jogging/Aqua Aerobics</p> <p><input type="checkbox"/> Swim fitness training</p> <p><b>School swimming lessons (teachers &amp; coaches)</b></p> <p><input type="checkbox"/> URAC Swim School program</p> <p><input type="checkbox"/> Use of equipment</p>
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Other requirements:

Change rooms

Female

Male

Family

If yes, a representative of the school must be present at the time of use.

**Participant Information**

Number of participants: \_\_\_\_\_ Time: (from – till) \_\_\_\_\_

Duration of booking: \_\_\_\_\_

**Venue Hire**

I have read and agreed to the Terms & Conditions of hire of facilities at URAC Aquatic Centre

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**THIS REPORT IS NOT A TAX INVOICE – DO NOT PAY ON THIS ADVICE**

*Office Use Only – Booking Details report received:*

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date