

Pool Party Rental Agreement 2016

PLEASE READ THE FOLLOWING BEFORE SIGNING.

- Section 1. Rental Agreement form to be completed and returned to the Warsaw Municipal Pool with payment.
- Section 2. Groups must agree to adhere to all pool, diving board, and slide rules and policies.
- Section 3. Refunds shall be restricted as follows:
- A. For a full refund of rental amount (100%), cancellation must be done two week priors to the event.
 - B. For a partial refund of rental amount (50%), cancellation must be done seven days prior to the event.
 - C. No refund will be given for cancellations made less than seven days prior to the event.
 - D. In the event of weather, we will reschedule the event. If the event cannot be rescheduled due to availability, approval will be requested for a full refund.
 - E. Refunds will take 10-14 business days.
- Section 4. **NO ALCOHOLIC BEVERAGES** are allowed on any city property. City Code Ordinance Chapter 6700.070; G. Drinking in public places is prohibited.
- Section 5. Adult to Child ratios shall be restricted as follows:
- A. For parties with more than 25 people in attendance, there will be an adult to child ratio of 1:10.
 - B. For parties with less than 25 people there will be no adult to child ratio as long as majority (50%) of the attendees are at least nine years and older. For parties with less than 25 people, and majority (50%) of the attendees are eight years and younger, there will be an adult to child ratio of 1:8.
- Section 6. All pool rentals will include the following:
- A. The use of all aquatic amenities
 - B. A fully staffed lifeguard team
- **PLEASE NOTE:** Pool rentals do not include set and/or clean up. Renter is responsible for making sure all personal belongings and trash are picked up.

PLEASE FILL OUT THE FOLLIWNG.

Contact Person: _____ 1.5 hour rental with 0-25 people (\$75) _____

Address: _____ 1.5 hour rental with 26-50 people (\$100) _____

Phone Number: _____ 1.5 hour rental with 51+ people (case by case) _____

OFFICE USE ONLY

Person Taking Reservation: _____ Date Reserved : _____ Time Slot : _____

Payment Method (circle one) : CASH CHECK CARD

Check Number : _____ Last 4 Digits Of Card Number : _____