

## POOL RESERVATION FORM

**\*\*\*Renter to fill in green box completely. Reservation is complete ONLY upon Confirmation.\*\*\*** Revised 1/9/20

Reservations made in advance and in person at Meadows Place Nature Center, 11938 Amblewood Dr, Office hours are M - F, 9 am - 4 pm (excluding holidays). A **refundable, cash deposit** must be paid at time of reservation along with rental fee. **Deposit are to be picked up at City Hall**, One Troyan Drive, M-F, 9am to 4pm. Reservation will be confirmed when payment of deposit is made. Read **RULES FOR USE** carefully.

**FAILURE TO FOLLOW ALL RULES WILL RESULT IN FORFEITURE OF DEPOSIT**

Deposit/Rental Fees	Resident	Non-Resident
<b>Pool - Private Rental</b> (After public hours, 3 hours)	<b>\$200-up to 25 guests;</b> <b>\$250-up to 50 guests</b> (paid with reservation, \$100 cash deposit)	<b>\$300-up to 25 guests;</b> <b>\$350-up to 50 guests</b> (paid with reservation, \$100 cash deposit)
<b>Pool Party</b> (During public hours - 2 hours)	<b>\$50-up to 25 guests;</b> <b>\$75-up to 50 guests</b> (paid with reservation, \$100 cash deposit)	<b>\$75-up to 25 guests;</b> <b>\$100-up to 50 guests</b> (paid with reservation, \$100 cash deposit)

**Guest list must be provided ONE WEEK prior to rental**

**Rental Time must include set up & clean up; pool MUST BE VACATED by end of rental period.**

Print Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Address, City, State: \_\_\_\_\_

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

Event Date: \_\_\_\_\_ Rental Time: \_\_\_\_\_ am/pm UNTIL \_\_\_\_\_ am/pm

Type of Function: \_\_\_\_\_ Number of People Attending: \_\_\_\_\_

I, \_\_\_\_\_ (print name), **VERIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT AND THAT I HAVE RECEIVED AND READ A COPY OF THE RENTAL POLICIES (RULES & REGULATIONS) FOR USE OF THE City Pool AND FURTHERMORE AGREE TO ABIDE BY THEM. I FURTHER AGREE TO BE PRESENT DURING THE TIME I HAVE RESERVED. I UNDERSTAND THAT THE City of Meadows Place SHALL NOT BE RESPONSIBLE FOR LOSS OF PROPERTY OR PERSONAL INJURY SUSTAINED BY USERS OF THE COMMUNITY CENTER AND TO THE PERSON AND PROPERTY OF ALL USERS AND SPECTATORS.**

**SIGNATURE:** \_\_\_\_\_ **DATE & TIME:** \_\_\_\_\_

Office Use Only	Date↓		\$	Renter's Initial↓	Staff Initial↓
1	Cash Deposit	Copy of DL Received	\$	Rules Received	
2	Rental Fee	Cash/Money Order/Credit Card Auth #	\$		
3	Key Pick Up	Key Color/#		Key Received	
4	Key Return	Key Color/#			
5	Deposit Return	Cash Only	\$	Deposit Refunded	

**Confirmation:** \_\_\_\_\_

Pool Staff Notification: \_\_\_\_\_

Post Rental Inspection: **OKAY TO REFUND DEPOSIT** **DO NOT REFUND DEPOSIT - see attached**