

ALGONQUIN PRIVATE POOL PARTY /RENTAL APPLICATION

You and your friends (up to 400) will have complete access to the swimming pool and locker room during closed hours for your party. We staff the facility with Lifeguards and a Manager to supervise your swimmers. **Mail or Drop Off Application to: Recreation Department * 2200 Harnish Drive, Algonquin, IL 60102**

Fees for Pass Holders:

Saturday & Sunday: 6:30-8:30pm
 1-50 Guests - \$275
 51- 100 - \$325
 101 + - \$375

Fees for Non-Pass Holders:

Saturday & Sunday: 6:30-8:30pm
 1-50 Guests - \$425
 51-100 - \$475
 101 + - \$525

*Unavailable Dates: 5/30, 5/31, 6/27, 6/28, 7/4, 8/29, 8/30, 9/5, 9/6

Date of Party: 1 st Choice:	2 nd Choice:	3 rd Choice:
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Time/Day of Party: _____ Saturday (6:30-8:30p) _____ Sunday (6:30-8:30p)

Contact Person:	# of Guests:
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Contact Person Address/City/Zip:	Confirmed Pool Pass Holder <input type="checkbox"/> Yes <input type="checkbox"/> No
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Telephone:	Email:
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Type of Party:

<p>Are you interested in bringing in outside food for the event? If yes, please list food/drinks (other than cake or cupcakes) that will be brought for approval: _____</p> <p>_____</p> <p>_____</p> <p><i>*Please note that no refrigerator or freezer will be available for use for the event</i></p>

DEPOSIT(S)	\$125.00 *Due at time of reservation
<p>The following items are to be found in satisfactory condition for the Facility Damage Deposit to be returned:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The person(s) and/or group reserving the pool is/are responsible for covering all repair expenses for damage to the facility caused during specified reservation time. <input type="checkbox"/> Any and all garbage/debris is removed by applicant at the conclusion of their event. Dumpsters are located behind the pump house. <input type="checkbox"/> <u>Cancellations made less more 48 hours in advance will be refunded rental fees less the deposit</u> 	

Pool Party Base Fee (Based on number of guests)	\$ _____
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I have read and understand the Village of Algonquin's Refund Policy and Pool & Splash Pad Rules.

In case of MEDICAL EMERGENCY, I authorize Village of Algonquin personnel to take such emergency action as may be deemed necessary. Please read this form carefully and be aware that in enrolling and participating in any program/course/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/course/activity.

I recognize and acknowledge that there are certain risks of physical injury associated with participating in this program/course/activity, and I voluntarily agree to assume the full risk of any injuries, damages, or losses, regardless of severity, that I or my minor child/ward may sustain as a result of such participation. I fully understand and agree that all programs/courses/activity shall be at my or my minor child/ward's sole risk. I further agree to waive and relinquish all claims I or my minor child/ward may have or which may occur to me and/or my minor/ward as a result of participation in this program/course/activity. I do hereby fully release and forever discharge the Village of Algonquin from any and all claims for injuries, damages, or loss that I or my minor child/ward may have or which may occur to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/course/activity. I have read and fully understand the important information listed above, warning of risk, assumption of risk and waiver, and release of all claims. I do hereby fully release the Village of Algonquin to take photos or video imaging of the activity(s) that I (or my minor child) am participating in for future use as the Village deems necessary.

Signature of Responsible Party	Date
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Office Use Only:			
Date Processed:	Received By:	Amount Processed:	Check Number