

Contact Name: _____

Phone #: _____ Cell #: _____ Fax #: _____

Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Date of Visit: _____ Day: _____

Number in group: _____ Number of kids: _____ Number of chaperones: _____

Swim Admission Rate: _____

Rental Space: Playground Pavilion

Rental time begins: _____ Rental time ends: _____

Swim Options: No Use Indoor Only Outdoor Only Both

Food Options: None Purchase Self Caterer: _____

RATES: Rental Rate: \$ _____

Refundable damage deposit: \$25

Late fee (booked within 5 days of rental date): \$25

The projected amount for the above leased premises shall be \$ _____.

Half of the rental rate amount and refundable damage deposit (\$ _____) is to be paid at booking of contract, and the remaining amount (\$ _____) is to be paid seven days prior to the event on _____.

The full projected (\$ _____) amount is to be paid at signing of contract, on _____ due to the booking occurring within 14 days of the event date.

Paid in full on _____.