



Des Plaines Park District

Splash Party Reservation Request

Please complete a separate form for each requested date.

An incomplete form or a form submitted without a \$50 deposit will not be processed.

Be sure to include a phone number where we can reach you with questions. *Thank you for your reservation!*

Reservation Date _____
First Choice Day of the week Month Date

Please check the time you prefer (1st choice):
 Mon–Fri: 10:00a–noon
 Saturday: 10:00a–noon 6:00–8:00p
 Sunday: 10:00a–noon 4:00–6:00p

Reservation Date _____
Second Choice Day of the week Month Date

Please check the time you prefer (2nd choice):
 Mon–Fri: 10:00a–noon
 Saturday: 10:00a–noon 6:00–8:00p
 Sunday: 10:00a–noon 4:00–6:00p

Splash Party For _____

Contact Person _____

Address _____

City _____ **State** _____ **Zip** _____

Phone Number _____ Office Cell Home

Alternate Number _____ Office Cell Home

Fax Number _____

E-mail Address _____

Resident fee: \$250 for up to 20 guests; \$5 per additional guest.

Non-resident fee: \$315 for up to 20 guests; \$5 per additional guest.

Pool Rental Fee	\$ _____
Additional Guests ____ x \$5 =	\$ _____
Wibit® Add-ons	\$ _____
Less your \$50 deposit.....	\$ _____ - \$50
Balance due on arrival	\$ _____

Please tell us:
 How many children _____
 How many adults _____*

Cash Check Visa Master Card Discover **Expiration Date** _____ / _____

Card Number

Please do not email your credit card information.

CVV 3-digits
 On back of card

Cardholder Name _____ **Charge Amount \$** _____

Signature _____ **Date** _____

* here must be at least one adult present for every ten children age ten and older, and one adult present for every five children under the age of ten. Supervisors who are eighteen years and older are considered adults.