

Private Pool Party Reservation Request

DES PLAINES PARK DISTRICT 2222 BIRCH STREET DES PLAINES, IL 60018 P: 847.391.5700 W: dpparks.org

Reservations are processed beginning April 1.

Please complete a separate form for each requested date. Incomplete forms and forms submitted without a \$100 deposit are not processed. Be sure to include a phone number where we can reach you with questions.

Date:					
Group Name:	Reservation Date:				
Contact Last Name:	First Name:				
Address:		City:		Zip:	
Primary Phone:	Secondary Phone	:	Email:		
Emergency Contact Name:	Er	mergency Pho	one:		
Preferred Time: Sat 6:30-	·	·			
R/NR Fee	\$500/\$615		Children under 3 yrs.		
Additional 60 Min. 8:30–9:30pm	\$200	Number of	Children 3+ yrs.		
Additional People	\$6/\$10 ea. x=_	Number of	Adults*.		
Total Due	\$	Total Gues	sts		
Deposit Paid	\$100		An incomplete form or a form submitted without a \$50 deposit will not be processed.		
Balance Due Day of	\$				
*There must be at least one ac five children under the age of					
Please sign the waiver on the	reverse side.				
The Des Plaines Park District r	eserves the right to change p	payment to refle	ect the correct fee.		
Check Number:	Cash:				
Credit Card Number:			Exp. Date:	CVV:	
Card Holder Name:	Au	thorized Signat	ture:		

Important Information

The Des Plaines Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Des Plaines Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for the listed programs/activities must recognize that there is an inherent risk of injury when choosing to participate in recreational activities/programs.

You are solely responsible for determining if you or your minor child/ward are physically fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

Warning of Risk

Recreational activities are intended to challenge and engage the physical, mental, and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning, and equipment. there is still a risk of serious injury when participating in any recreational activity. Understandably, not all hazards and dangers can be foreseen. Depending on the particular activity, participants must understand that certain risks, dangers and injuries due to inclement weather, slip and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, instruction or officiating. and all other circumstances inherent to indoor and outdoor recreational activities exist. In this regard, it must be recognized that the Des Plaines Park District can't guarantee absolute safety.

Waiver and Release of All Claims and Assumption of Risk

Please read this form carefully and be aware that in signing up and participating in the programs listed, 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 these programs (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in these programs against the Des Plaines Park District, including its officials, agents, volunteers, and employees.

I have read and fully understand the important information, warning of risk, assumption of risk and waiver, and release of all claims. If registering online or via fax, my online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PARTICIPATION WILL BE DENIED
If the signature of adult participant or parent/guardian and date are not on this waiver.

Participant Signature:	Date:	
Parent/Guardian if under 18:	Signature:	