

2024 Private Pool Party Reservation



City of Harvard Parks & Recreation
 Aquatic Center
 607 Galvin Parkway
 815-919-7411

Primary Name: _____

Street Address: _____

Phone Number: _____

Email: _____

Emergency Contact: _____

Emergency Contact Phone Number: _____

Number of Person Requested: _____ Today's Date: _____

AVAILABLE POOL PARTY HOURS

SUNDAY	7:15 PM– 9:15 PM
MONDAY	7:15 PM– 9:15 PM
TUESDAY	7:15 PM– 9:15 PM
WEDNESDAY	7:15 PM– 9:15 PM
THURSDAY	7:15 PM– 9:15 PM
FRIDAY	7:15 PM– 9:15 PM
SATURDAY	7:15 PM– 9:15 PM

Custom Time Request:

Day of Week: _____

Date: _____

Time: _____

Any custom time request must be reviewed by management staff before approval. We will contact you within 7 days at the phone number provided if your request is approved.

APPROVED SIGNATURE

POOL MANANGEMENT

- 2 HOURS OF POOL PARTY FOR \$450
- ADDITIONAL 30 MINUTES OF POOL PARTY \$100
- OVER 40 PERSONS CHARGE \$2.00 PER PERSON
- CHARCOAL GRILL AVAILABLE—NO CHARGE
- MISC. CHARGERS: _____

TOTAL OWED: _____

YOU MUST BE OUT OF THE POOL AND BUILDING BY THE SCHEDULED ENDING TIME

Deposit Owed (50%min): \$ _____	Balance Paid \$ _____	<u>OFFICE PAID STAMP</u>
Check Number: _____	Check Number: _____	
Cash Amount: _____	Cash Amount: _____	
Received By: _____	Received By: _____	
Date Received: _____	Date Received: _____	



CITY OF HARVARD PARKS AND RECREATION WAIVER

The City of Harvard is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard.

The City of Harvard 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 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 programs/activities contemplated by this agreement. All City of Harvard Parks & Recreation activities including but not limited to basketball open gym, basketball league, swimming, tumbling, tennis lesson, cheerleading camp and basketball camp will hereinafter be collectively referred to as programs/activities. 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 programs/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 program/activity. Understandably, not all hazards and dangers can be foreseen. Depending on the program/activity, participants must understand that certain risks, dangers, and injuries due to inclement weather, slipping, falling, 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 programs/activities exist. In this regard, it must be recognized that it is impossible for the City of Harvard to 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 City of Harvard Parks and Recreation programs/activities, you agree to the following:

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 (accrue to me or my child/ward) as a result of participation in these programs/activities against the City of Harvard, including its officials, agents, volunteers and employees (hereinafter collectively referred to as "The City of Harvard"). I do hereby fully release and forever discharge the City of Harvard from any and all claims for injuries, damages, or loss that my minor child/ward or I may have which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with these programs/activities.

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

Parent/Guardian/Participant's Signature _____ Date _____

PARTICIPATION WILL BE DENIED

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

For more information contact Supt. Stacy Heiliger at (815) 943-6468 or e-mail at Heiliger@cityofharvard.org