## Decatur-Adams County Parks and Recreation Department 2020 City POOL RENTAL AGREEMENT 315 Maple St, Decatur, IN 46733

## **Rental Rates**

\$100 per hour 1-49 swimmers \$125 per hour 50-99 swimmers \$150 per hour 100-149 swimmers \$175 per hour 150-200 swimmers

## Additional Rental Fee Policy for Water Contamination:

A \$70.00 to \$125.00 chemical charge will be incurred to super-chlorinate the Decatur City Pool caused by vomit, blood or fecal accident. This treatment will eliminate the risk of the pool water being contaminated with Noroviruses, Cryptosporidium, Giardia, E-coli and/or Shigella.

Plus: An additional \$10.00 per person, per hour cleaning rate will be incurred to disinfect pool toys (kickboards, noodles, diving rings, etc.) and pool equipment (brushes, poles, screens, etc.) that were exposed to the contaminated water. With a minimum of 1 hour. The total minimum charge to be incurred will be \$80.00 to disinfect the pool.

Name:
Address:
Phone: ()
Representing:
Rental Date:/
Rental Time::to:pm (Earliest time to start rental is 5:30pm – 2 hour limit)
General description of group (circle one):
Youth 17 & under Adults Families School Group
Approximate Number in group: Rental Fee/Hr. \$ Total Fee: \$
PLEASE READ CAREFULLY: We understand that
-Final decisions regarding closing/cancellations are at the discretion of the Department Staff only
-Alcohol is not permitted -The premises are to be left in the same condition as when we arrived
-All rules and policies apply to rentals
-Food and drink may be brought into the facility, but eat ONLY inside the concession area -Our party will be allowed to enter the facility no earlier than the confirmed rental time.
The entire fee will be due on the day of the rental.
Reservation will not be taken less than three (3) business days in advance of the rental date.
The entire fee will be forfeited if the Department is not notified of a cancellation three (3) business days in advance of the reserved date.
I, as representative of the above named group, hereby reserve the Decatur City Pool for the date and time indicated. As the responsible party for this group, I understand it is my duty to see that all pool policies and rules are followed by the group while using the facilities.
Signature: Date: