



Date: _____

**CHAMPAIGN FAMILY YMCA &
URBANA CITY POOL**
689 Park Lane, Urbana, Ohio 43078
937.653.6994 / 937.653-9622
www.champaignfamilyymca.org

POOL RENTAL AGREEMENT

Name of Group: _____

Person who is responsible for this group and who will be in attendance during the entire event.

Name: _____ **Address:** _____

Telephone: (_____) _____ - _____ **Alt #** (_____) _____ - _____

Email (required): _____

Rental Date: ____/____/____ **Time:** _____ to _____

Number of people expected to attend: _____

Pool rental: \$100 per hour (includes lifeguards) **Total \$** _____

\$100 NON-REFUNDABLE DEPOSIT DUE TO RESERVE THE DATE. Remaining balance must be presented in advance of the party date. Checks can be made payable to the Urbana City Pool.

NO ALCOHOLIC BEVERAGES!!!

I, _____ do hereby accept the responsibility for the conduct of the people in attendance at the above named event held at the Urbana City Pool. I understand that the Urbana Parks and Recreation Department, Champaign Family YMCA, and their staff are in no way responsible for the loss of property or personal health. I understand that if any person in this party conducts themselves in an unsafe and / or unruly manner, the staff members of the pool may immediately cancel the remainder of the party and the party in attendance will forfeit the balance of the fee for the use of the pool. There will be no refunds unless the renting party gives the Urbana City Pool management sufficient time to cancel all workers scheduled on the intended date. If rescheduling is necessary due to inclement weather, Urbana City Pool management will do their best to arrange an alternate date before issuing a refund. Refunds will be at the discretion of the Pool management.

Signature of responsible party for event _____ **Date** _____

Signature of Pool Management _____ **Date** _____

Cash _____ Check _____ Deposit _____ Date Paid _____ Balance _____ Date Paid _____