SANGER PARKS & RECREATION DIVISION
APPLICATION FOR POOL RENTAL

Applicant or Organization Name:_____

Address:_____ Phone (1):_____

Email:_____ Phone (2):_____

Date of use:_____ Start Time:_____ End Time: _____ #_____(250 Max)

Purpose of rental (explain in detail):_____

Rental Packages: Minimum Time Rental 4 hrs.- Facility Cost $500

* *50% rental fee deposit due at time of reservation- All fees and Insurance forms due 10 Business Days before event* _____ *initial*
** *Rental fee deposit will be forfeited if rental is canceled within 30 days of event* ***No exceptions*** _____ *initial*
*** *I understand no glass or alcohol is permitted and all boxes or ice chest are subject to inspection* _____ *initial*
**** *Pool is subject to close without notice due to weather (lighting) Safety& Health issues or mechanical failures* _____ *initial*
***** *I will ensure all members of my party follow all pool rules and policies.* _____ *Initial*

Applicant Signature _____ *Date:* _____

Insurance is required at the time of pool rental

1) Homeowners Option: (For people with homeowners' insurance)

- Insurance for events must present an additional insured endorsement (form CG2010)

* This policy is for $1,000,000 and must have an additional endorsement stating it covers, **"The City of Sanger, Officers, Officials, Employees and Volunteers".**

* *Full payment is due at least 10 business days prior to your reservation.*

>>>>>>>>>>>>>>>>>> FOR OFFICE USE ONLY <<<<<<<<<<<<<<<<<<

CC: Pool Manager **# of lifeguards needed _____**

Reservation Fees:

Rental Fee _____

Total _____ Total Fee (Ins. + Rental)

Payment _____ Date: _____

Balance (Total Fee - Payment) _____ _____

Payment _____ Date:

Balance _____ _____

Payment _____ Date:

Balance _____ _____

Payment _____ Date:

Balance ***Paid in Full*** _____

_____

Application approval by:_____ Date:_____