



PLAINFIELD PARK DISTRICT – OTTAWA STREET POOL  
BIRTHDAY PARTY & PRIVATE RENTAL APPLICATION

2010  
APPLICATION

CONTACT INFORMATION

Contact Name: \_\_\_\_\_ Organization: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone (H): (\_\_\_\_) \_\_\_\_\_ Phone (C): (\_\_\_\_) \_\_\_\_\_ Phone (W): (\_\_\_\_) \_\_\_\_\_

RENTAL INFORMATION

Date of Rental: \_\_\_\_/\_\_\_\_/\_\_\_\_ # of Guest Expected: \_\_\_\_\_ # of Guest over Head Count: \_\_\_\_\_

**PRIVATE RENTAL**  Rental times are two hours long. Fee of \$240.00 includes admissions for up to 40 guests, each additional guest over 40 is \$4.00. All guests attending the rental are included in the head count. Full payment is due at the time of the reservation. In the event of a cancellation, a 48 hour advanced notice is required.

Monday – Friday (8:30 – 10:30 pm)  Saturday & Sunday (8 – 10 pm)

**BIRTHDAY PARTY**  Rental times are two hours long during regular hours of operation. Fee of \$100.00 includes admissions for up to 20 guests, each additional guest over 20 is \$4.00. All guests attending the rental are included in the head count. Full payment is due at the time of the reservation. In the event of a cancellation, a 48 hour advanced notice is required.

Monday - Friday (2 – 4 pm)  Saturday & Sunday (6 – 8 pm)

**Other**  Please Specify \_\_\_\_\_

Special Arrangements:  Yes  No If so, please specify: \_\_\_\_\_

AGREEMENT/ PAYMENT INFORMATION

By signing this form, I acknowledge that I have read and agree to abide by all Park District rules and regulations.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

If authoring the Plainfield Park District to charge your credit card for the amount of the rental, please provide us with the information below:

Payment Amount: \$ \_\_\_\_\_  Check Payable to Plainfield Park District (ck #: \_\_\_\_\_)  Cash Payment

Visa  Mastercard

OFFICE USE ONLY

Reservation #: \_\_\_\_\_

Type:	Rental Fee:	Additional Fee:	Total Payment Due:	Amount Received:
<input type="checkbox"/> Private Rental				
<input type="checkbox"/> Birthday Party				

Application Approved:  Yes  No Date Approved: \_\_\_\_/\_\_\_\_/\_\_\_\_ If not, please specify: \_\_\_\_\_

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Head Guard Signature: \_\_\_\_\_ Date: \_\_\_\_\_