



BLOOMINGTON FAMILY AQUATIC CENTER

2020 Reservation Form

ORGANIZATION: _____ CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____

DAYTIME PHONE: _____ FAX: _____

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____
(number of people) (total due) \$7.00 X _____ = _____
(after 5pm) (number of people) (total due)

POOL Rental \$425 X _____ = _____
(plus tax) (number of hours) (Total)

Number of people counts are used for lifeguarding purposes only and may be edited before payment.

*For multiple reservation dates please use additional form.

All birthday party reservations must pay for 20 people at the time the reservation is made. The additional payment is due no later than the day of your reservation.

- Please bill us after our event (supervisor authorization needed)
- Our organization is Tax Exempt (Please include your certificate of exemption)
- Payment will be made on site on the date of the reservation

WAIVER:

I understand that participation in an activity or program is completely voluntary and that the activity or program being offered is for the benefit of the participant. The City of Bloomington shall not be liable for any claims, injuries or damages, of whatever nature, incurred by the participant which are directly or indirectly attributable to the negligence, whether passive or active, of the City, their agents or employees, arising out of, or in connection with the activity or programs. On behalf of the participants, and myself I expressly release and discharge the City, their agents or employees from any such claims, injuries or damages. I also understand this waiver includes any injuries that may result from the condition of facility used in the activity or program.

FEES/AGREEMENT:

I understand that this is a binding agreement and payment must be made on the day of the event for Birthday Party Packages, accompany registration form for Private Rentals, and may be billed or paid the day of the event for Group Reservations. I have read, understand, and agree to follow the policies and procedures for Group Reservations. Cancellations must be made prior to 11:00 a.m. on the day of your scheduled reservation in order to avoid being billed/charged.

Signature of Applicant _____ Date _____

Signature of Recreation Supervisor _____ Date _____

Please e-mail to: drbenson@bloomingtonmn.gov

OR Fax to: 952-563-8715

Office Use:
Date Received: _____
DATE PAID: _____
Participant Rate: _____ X \$ _____ = \$ _____
Amount Paid \$ _____ Reservation # _____
Paid by: _____
Check # _____ (Payable to City of Bloomington)

Cash MasterCard/Visa/Discover/American Express
Card #: _____ - _____ - _____ - _____
Exp. Date: _____ CVV Code: _____



BLOOMINGTON FAMILY AQUATIC CENTER GROUP ETIQUETTE AND RULES

All group members are expected to follow all Bloomington Family Aquatic Center rules. Please see reverse side for our general pool rules.

All groups must have a rules orientation with Aquatic Center staff before entering the facility on their first swim trip of the year.

- The same organization bringing different children and counselors must have a rules orientation with each new group of participants.
- Please see the front desk and have participants wait on the grassy area outside of the facility or on the bus.

Groups must have adequate adult chaperones in the water who are actively supervising children.

- The City of Bloomington requires in-water chaperone to child ratios of 1:8 for children ages 6 and under and 1:10 for children 7+ at our aquatics facilities.

Groups need to use the designated women's and men's changing rooms within the facility.

- Those needing extra support changing or a private changing environment must use the unisex restrooms accessible from the pool deck near Concessions.
- Please keep the family/accessible restrooms inside the building clear for individual and family use.

All Swimmers must have a swimsuit in order to swim in the pool.

- Street clothes are not permitted. Swimmers must have a designated outfit for swimming.

Swim Diapers are required for children that are not independently toilet trained.

Due to the limited number of chairs available on the pool deck, please have participants and staff leave their belongings on the grass.

Swim tests are given at group request to determine participant's swimming ability.

- Please see lifeguards upon entry and wait for their direction.
- Groups are only permitted to do one whole group swim test each season. Participants may be tested on an individual as needed.

Please supervise the concessions area and help children with their money, food, and clean-up.

- One adult chaperone must be present at the concessions stand when participants are purchasing or eating concessions items.
- Please help keep our facility clean by throwing away trash and cleaning up spills.
- Please see the "Group Concessions Menu" for concessions items and pricing available to your group—this may be distributed to families in advance for planning purposes!
- Picnic space is available outside of the pool fence for groups bringing outside lunches.

Our group has read and understands the above etiquette and rules for the Bloomington Family Aquatic Center. Our group will follow the above etiquette and rules during our summer usage at the pool and understands that failure to follow the above policies may result in denial of future group reservation requests.

_____ Name

_____ Position

_____ Signature/Date



BLOOMINGTON FAMILY AQUATIC CENTER

Multiple Reservation Form

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____ \$7.00 X _____ = _____
(number of people) (total due) (after 5pm) (number of people) (total due)

POOL Rental \$400 X _____ = _____
(plus tax) (number of hours) (Total)

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____ \$7.00 X _____ = _____
(number of people) (total due) (after 5pm) (number of people) (total due)

POOL Rental \$425 X _____ = _____
(plus tax) (number of hours) (Total)

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____ \$7.00 X _____ = _____
(number of people) (total due) (after 5pm) (number of people) (total due)

POOL Rental \$425 X _____ = _____
(plus tax) (number of hours) (Total)

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____ \$7.00 X _____ = _____
(number of people) (total due) (after 5pm) (number of people) (total due)

POOL Rental \$425 X _____ = _____
(plus tax) (number of hours) (Total)

Requested Date: _____ Arrival Time: _____ Departure Time: _____

Groups \$9.00 X _____ = _____ \$7.00 X _____ = _____
(number of people) (total due) (after 5pm) (number of people) (total due)

POOL Rental \$425 X _____ = _____
(plus tax) (number of hours) (Total)