

Town of Biscoe Contract For Facility Use Private Pool Party

Name							
Organization	n						
Phone: (Day/Cell)		(Evening):	(Evening):				
Full Address							
Date of Event:		Hours of Event (Include set-up & cle		AM/PM	Day of the Week (Circle) T W Th F Sat. (AM) Sat. (PM) Su		
How many c	:hildren?	Age Range	Æ	Any non-swimmers? Yes/No			
How many a	adults?	Are any adults swi	mming during the ev	/ent? Yes/No			
Type of Event:			Contact Pers	Contact Person Onsite During Event:			
can Ple c) I u clo can It is distinct. that may an Recreation I will save and	ncellation of r ease Initial inderstand that osure due to concellation, 100 ly understood ise during or I Department. To d hold harmle	my party. (If you choose c at public pool use is unpr contamination may occur 0% of fees paid will be re d and agreed that the ap be caused in any way by The applicant further agr ess the Town of Biscoe an	cancellation, 100% of redictable and that a causing the reschedu eturned.) Please oplicant assumes all in resuch use or occupant rees that in consider and said Parks and Rec	f fees paid will b at any time prio luling or cancella Initial risks for loss, do ncy of the facilit ration of being creation Departi	or to my scheduled part a pool lation of my part (if you choose damages, liability, cost of expenses ity of the Town of Biscoe Parks and permitted to use said facility they tment and/or their employees from		
loss, claims,	liabilities or a	damages, and/or injuries	of persons and prope	erty that in any	v way may be caused by applicants tal carefully and agree to them as		
Signature of	Applicant or F	Representative		_ Date			
Office l	Use Only	ΡΑγ	MENT MET	HOD	Office Use Only		
		Cash (Check#	Credit Carc	t		

2 hours (\$100) 3 hours (\$150)

| 221 Mill Street | Biscoe, N.C. 27209 | 910.428.4138 |