

Wilmette Park District – Centennial Family Aquatic Center  
Summer of 2017

# Group Reservation Request Form

For group reservations and available times, please call the pool office at **(847) 256-9680** or email us at [poolparties@wilpark.org](mailto:poolparties@wilpark.org) . Complete the following information and return this form with a \$75.00 deposit to the Wilmette Park District - Centennial Family Aquatic Center, attn: Rental / Party Coordinator, 2300 Old Glenview Road, Wilmette, IL 60091.

**Reservations will not be booked without a \$75.00 deposit.**

1. Requested Day \_\_\_\_\_ / Date \_\_\_\_\_

2. Requested Day \_\_\_\_\_ / Date \_\_\_\_\_

3. Requested Day \_\_\_\_\_ / Date \_\_\_\_\_

Person in Charge: \_\_\_\_\_ Phone # (\_\_\_\_) - \_\_\_\_\_

Group / Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Total number of people expected \_\_\_\_\_ How many children will be attending? \_\_\_\_\_

Average age of the group? \_\_\_\_\_ How many adults will be supervising? \_\_\_\_\_

- **Lifeguards are responsible for enforcing safety rules and responding to emergencies. Parents or guardians should supervise their children at all times. In order to provide for your safety, Centennial Family Aquatic Center requires the following adult to child supervision ratios:**
  - Under 6 years of age = 1 adult for every 2 children
  - Ages 6-8= 1 adult for every 4 children
  - Ages 8 and up – 1 adult for every 6 children

**Does your group require any special needs accommodations? If yes please explain:**

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**Payment type: (Circle One)**    Deposit                      Cash    Check    Visa    MasterCard    Discover

\$75.00 deposit Received on (Date) \_\_\_\_\_ Received by (Initials) \_\_\_\_\_

**Balance Due**    Cash    Check    Visa    MasterCard    Discover    Invoice (Must have prior approval)

Balance Due \$ \_\_\_\_\_ Received on: (Date) \_\_\_\_\_ Received by Initials \_\_\_\_\_

**Send Invoice to:**

- **Organization:** \_\_\_\_\_
- **Name:** \_\_\_\_\_
- **Address, City, State, Zip:** \_\_\_\_\_
- **Phone #** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_

