



South Umpqua Memorial Pool
City of Myrtle Creek
541-863-6805

Rental Policy

- 1) Full payment and this completed form is due before the date of the rental.
- 2) The same rules shall apply during the pool rental as during public swim times. (rules are posted at the facility, additional safety rules may be implemented per lifeguards discretion)
- 3) Special equipment owned by the pool is to be used by the discretion of the lifeguards on duty. Other equipment brought by the party reserving the pool may be allowed after checking with the lifeguard.
- 4) A responsible adult (21 years of age or older) must be present at all times to supervise during the time the pool is being rented.
- 5) Refunds will not be made if an action or incident occurs which forces the lifeguard to request that the group leave.
- 6) In the event of severe weather conditions the lifeguard will ask that the party reschedule if possible, if not, a refund will be issued by the City of Myrtle Creek.
- 7) Cancellation of rentals must be made at least 24 hours in advance in order to issue a refund.
- 8) We require the person renting the pool let us know how many swimmers will be attending. As long as the there are under 50 it is okay to write an approximate number. If it is over 50 we will need to know so as to bring on another lifeguard at an additional \$25.00 per hour. Maximum capacity rules apply.
- 9) Use of the big slide is up to the party renting the pool. If the slide is open a designated adult is required to attend it (enforcing all slide rules). A staff member may be requested to attend the slide at an additional cost, this must be arranged 24 hours in advanced.
- 10) Please keep in mind that the pool rental is by the hour. Your party will not be allowed in until the reserved time. If there happens to be another rental following yours, the party will be asked to leave no sooner than 15 minutes before the reserved time is up. If you have any questions or concerns before or after the rental feel free to see the manager.

I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO THE POLICIES AND RULES STATED.

Print Name _____ Signature _____

Organization _____ Date _____

Phone Number _____

Date Requested _____ Time _____ # of swimmers _____

To be completed by staff

Payment _____ (receipt #) _____ Date _____

Staff _____