

2123 Park Street PO Box 218 Highland, IL 62249 www.highlandil.gov

AFTERHOUR RENTAL FORM

Highland Community Pool Ph: 618-654-4510

Name	Association/Gro	oup (if applicable)	
Home/Cell Phone	Email _		
Address	City	Zip	
Rental Date	Time	Will food be served? YES NO	
Age Range # of You (Please note that for every five children und	uth # of A der the age of 9, you need ar	dults (16+) Total #	
Monday & Wednesday	8:30PM to 10:30PM or	6:00PM to 8:00PM (available late August)	
Tuesday, Thursday, & Friday	9:00PM to 11:00PM		
Saturday	10:45AM to 12:45PM o	or 6:00PM to 8:00PM	
Sunday	6:00PM to 8:00PM		
\$140.00 SEASON PASS HOLDER	RS \$160.0	0 NON-SEASON PASS HOLDERS	
 tables and deck. All regular pool rules apply of the rental if no damage occur. You may arrive fifteen minut clean up. If you stay longer to staff to stay longer. Rental fees will be refunded two weeks but not prior to two weeks but not prior to two water at least fifteen minutes more than thirty minutes, you will be processed for that among the management of the stay of the	during rentals. deeded before the event a red. tes prior to your rental to than fifteen minutes after if notice of cancellation to days before, and no residuring your rental, all safter the last lightning bur rental fee will be protount.	lean up after yourself so that staff only has to hose and will be returned in full approximately a week a set up and stay fifteen minutes after your rental to ryour rental, your deposit may be used to pay the is two weeks prior to the event, 50% refunded with a stay out of the water and stay out of the water and stay out of the under sounded. If you are out of the water ated to the nearest quarter of an hour and a refundes Covid Precautions	after to thin of the er for
Signature:	Date: _	Employee Initials:	

Security Deposit \$50 Check # _____ Payment ____ Cash / Check # _____ / Credit Card