



Village of Hinsdale Community Pool

BIRTHDAY PARTY FORM

- **Dates Available:** Birthday parties may be conducted between June 9 – August 18, 2024, during open swim hours. (12pm – 7:00pm). Check date availability with the Parks and Recreation office. The party must be booked a minimum of 1 week prior to the party date.
- **Guests:** Standard Birthday party fee includes **1 birthday child, 10 child guests, and suggested 4 adult chaperones (15 guests' total)**.
 - Additional guests may be added, up to 20 guests max per party. See below for additional guest fees.
 - **All parties must sustain a minimum of 1 adult chaperone for every 6 children ratio. 1:6.**
- **Time:** Your party will include 2 hours of party time, 2 reserved tables in the concessions area, and reserved grass space to use for party games or party activities.
- **Food:** Please **do not** bring outside food onto the premises. Instead, we encourage you to enjoy our delicious options available for purchase through our concession vendor.
- **Beverage:** Prepackaged beverages like bottled water, Gatorade, soft drinks, or juice boxes may be brought in. **Please Note: Glass bottles or containers are not allowed. Alcohol is not allowed!**
- **Dessert:** A cake or similar dessert may be brought in.
- **Refrigeration:** Your beverages and cake may be stored in the Pool Office fridge during your allotted party time. All supplies must be removed once the 2 hour party time is completed. (Restrictions for fridge storage may apply based on the size of cake and beverages. Please reach out if you have questions).
- **Setup & Cleanup:** Set-up may begin 20 minutes prior to party time. You will have 20 minutes after the allotted party time to clear party supplies, décor, and garbage from the concession deck and grass area.
- **Refunds and Cancellation Policy:** There is no refund for cancellations within the 48 hours prior to the party. Cancellations due to inclement weather may be rescheduled to a later date in the season. Cancellations made less than 7 days prior to party forfeit 50% of fee. Cancellations prior to 7 days prior to the party will be refunded less a \$20 processing fee. *Refunds checks take 4 – 6 weeks to process and are mailed to your address on file.*
- **Birthday Party Fee:** \$190 R & Pool Member / \$210 NR / Non Pool Member. **Each additional Guest:** \$8 per guest (up to 20 guests max)

Questions & completed birthday party form may be directed to Todd Linder, Recreation Supervisor at tlinder@villageofhinsdale.org, (630)789-7097 or to parkrec@villageofhinsdale.org, 630-789-7090.

Hinsdale Community Pool Birthday Party Details:

Date Requested: _____ **Time:** (2 hours between 12pm-7pm) _____

Time You Plan to Serve Food/Cake to Your Guests: _____

(Pool staff will make an announcement to your guests to meet at the concession deck at this time).

Number of Children (including b-day child): _____ **Number of Adults:** _____

(FINAL total number of attendees required 48 hours prior to party, additional attendees may be paid for at this time).

Child Name/Age:

Parent/Guardian Name:

Address:

Phone: _____ **Email:** _____

Total Fee: _____ **Date Paid: (due at booking)** _____ Cash ___ Check ___ Card ___

- C/C Number: _____ Exp: _____ 3 Digit Code: _____
- Check Number: _____

Birthday Party Fee: \$190 R & Pool Member / \$210 NR / Non Pool Member.

(1 birthday child, 10 children, suggested 4 chaperones = 15 guests total)

Each additional Guest: \$8 per guest (up to 20 guests max)

❖ *Birthday Party payments can be mailed or delivered in person to Village of Hinsdale, 19 E. Chicago Ave, Hinsdale, IL, or Dropped in the Village Hall Secure Drop Box, Emailed to Parkrec@villageofhinsdale.org, Faxed to: 630-789-7016 or by credit card over the phone to 630-789-7090. Initial payments are due upon booking. Added guest payments can be paid at time of final guest count confirmation.*

- **All checks paid to: Village of Hinsdale**
- **All payments made to: Attn Parks and Recreation Department.**

Signature: _____ **Date:** _____

For Office Use Only:

Date / Time Choice Approved & on Pool Calendar: _____

Payment Received: _____ Final Guest Count Confirmed: _____

VILLAGE OF HINSDALE WAIVER AND RELEASE

I have read this form carefully, and am aware that by signing this form and registering and participating in, or registering my minor child/ward for and allowing his or her participation in the Programs listed above on this form: (hereinafter referred as the "program"). I am WAIVING and RELEASING all claims for myself and my minor child/ward arising out of such registration and participation. In consideration of the Village of Hinsdale (the "Village") accepting me and/or my minor child/ward as a participant in the Program, I hereby agree as follows:

ACKNOWLEDGMENT AND ASSUMPTION OF RISK OF INJURY AND LOSS: I have fully informed myself of all of the details of the Program and have received satisfactory answers to all questions I have concerning the Program and the risks inherent in the Program and believe and represent that I and/or my minor child/ward have the necessary abilities, skills and knowledge to participate in the Program. I recognize and acknowledge that the Program involves risks of bodily injury, death and property loss. I hereby agree to, and do, assume the full risk of any injuries, including death, and of any property loss and of all expenses, costs, damages and losses that I, or my minor child/ward on whose behalf I am signing, may sustain as a result of participating in any and all activities connected with or associated with the Program.

WAIVER AND RELEASE OF CLAIMS: I hereby agree to, and do, waive release and relinquish all claims, demands, rights of action, damages, liabilities and controversies of every kind, known and unknown, present and future, that I, or my minor child/ward on whose behalf I am signing, may have against the Village and its officers, agents, servants, employees, insurers, related or affiliated individuals or entities, successors and assign arising out of, connected with, or in any way related to the Program or my minor child/ward's participation therein.

INDEMNITY AND DEFENSE: I hereby further agree to indemnify and hold harmless and defend the Village and its officers, agents, servants, employees, insurers, related or affiliated individuals or entities, successors and assigns from any and all claims, lawsuits, demands, damages, liabilities, losses and expenses, including attorney's fees and administrative expenses, of every kind, known and unknown present and future, arising out of, connected with, or in any way related to my or my minor child/ward's participation in the Program.

EMERGENCY CARE: In the event of an emergency, I authorize the Village to secure, from any licensed hospital, physician and or other medical personnel, any treatment deemed reasonable and necessary for myself and/or my minor child/ward's immediate care and agree that I will be responsible for payment for any and all such treatment rendered.

I have read and fully understand the above WAIVER & RELEASE OF ALL CLAIMS and execute it of my own free will and without any reservation whatsoever.

Sign Here: _____

Signature of parent, guardian, or an adult participant 18 years or older

Date _____

Participation will be denied if the signature of adult participating/parent/guardian and date are not on this waiver.