

CITY OF LIVINGSTON COMMUNITY POOL Pool Rental Form

Name of Renter:	
Address:	City:
Phone Number:	Email:
Rental Rates	
• \$85.00 per hour (0-50 per	e included with this form to reserve the rental date ople) – includes 2 lifeguards on duty cople) – includes 3 lifeguards on duty
Regulations	
	vailable at scheduled rental time due to daily schedule when you have 20 minutes and 5 minutes remaining for
	lltiple available hours if times are available llowed
 Noodles and pool toys are 	e available for use (no lifejacket use)
 Food and Beverage is not 	· · · · · · · · · · · · · · · · · · ·
	e must be picked up or thrown away in outside dumpsters
at the end of usage.	
-	rooms will be left in an acceptable appearance
• If all regulations are met,	deposit will be returned at the end of usage
Rental Information	Swimmer Information
Date of Rental:	*Number of Swimmers:
Start/ End Time of Rental:	*Age of Swimmers:
Total Hours:	*Number of Non-Swimmers:* *Anticipated
Renter Signature:	Date:
Pool Manager:	Date:
OFFICE USE: # of Lifeguards needed:	
\$100.00 received: yes / no	Payment Total Amount Due:
Check #/Cash Amt:	Deposit Amount Subtracted from Total:

Total Amount Due:

Deposit Returned:

yes / no