



DATE REQUESTING _____

\$ 165 Inflatable, Pool & Whirlpool (3 Lifeguards/40 Swimmers)

\$110 Pool & Whirlpool (3 Lifeguards/40 Swimmers)

\$ 95 Pool Only (2 Lifeguards/40 Swimmers)

\$ 95 Pool & Whirlpool (2 Lifeguards/30 Swimmers)

\$ 75 Pool Only (1 Lifeguard/20 Swimmers)

CAFE FEE \$ 65 Space Rental (HS Cafe or CC Community Room based on Availability)

POOL TIME RENTAL 2:45 - 3:45 pm Saturday 3:45 - 4:45 pm Saturday 1:00 - 2:00 pm Sunday

CAFE TIME RENTAL 3:45 - 4:45 pm Saturday 4:45 - 5:45 pm Saturday 2:00 - 3:00 pm Sunday

Adult over age 21 responsible for appropriate activity, supervision, adherence to all policies, and facility security:

Name _____

Cell # _____ Home # _____

Address _____

City _____ State _____ Zip _____

Email _____

Birthday Child or Organization _____

No. of Swimmers: Adult(s) _____ Children _____ Age Range of Children _____

Swimmers under age 12 are required to take a swim test prior to entering the pool and under age 6 must be accompanied in the pool by an adult at all times.

Waiver: As the renter/user, I understand and agree to comply with all facility rules and agree to pay any costs incurred due to incident of use.

Signature _____ Date _____

Non-taxpayers, please add additional 10% to total cost of pool/cafe rental.

Please return completed form and check payable to CECS to 343 Ocean House Rd., Cape Elizabeth, Me 04107.

Total Paid \$ _____ Cash/Check No. _____ Date Received _____