



# PRIVATE RENTAL

Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Number of people in attendance**

Adults (over 21 yrs) \_\_\_\_\_  
 Ages 13-20 yrs \_\_\_\_\_  
 12 yrs & Under \_\_\_\_\_

List your 1st & 2nd Choices for Date and Time:

1st Choice \_\_\_\_\_ Time \_\_\_\_\_  
 2nd Choice \_\_\_\_\_ Time \_\_\_\_\_

## Rental Rates

Number of Guests:	0-50	51-100	100-200
	R/NR	R/NR	R/NR
Entire Facility	\$225/315	\$249/339	\$275/365
Mango Bay (Includes slides)	\$99/129	\$125/155	\$149/179
'Cuda Cove	\$75/105	\$99/129	\$125/155
Otter Island	\$25/40	\$25/40	\$25/40
Drop Slide	\$45/60	\$45/60	\$45/60

**\*Fees are per hour.**

**\*Rentals include concession tables and deck space.**

### Rentals Availability:

**Thursdays and Fridays Starting at 8:00pm**  
**Saturdays and Sundays Starting at 7:00pm**



# Rental Policies

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A \$100 down payment is due to secure a reservation. Once you have been contacted and a date has been approved, final payment of the party is due at least one week prior to the scheduled date.

🌴 Rentals must be scheduled a minimum of two weeks in advance.

🌴 Rentals may be cancelled due to inclement weather at the discretion of the Oasis Manager.  
■ If the Oasis closes due to inclement weather, the rental will be rescheduled at no additional charge; time permitting.

🌴 A two-week notice must be given to reschedule or cancel. If cancellation is not given two weeks in advance, the down payment will be forfeited.

🌴 Should you opt to use a third party catering service, a certificate of liability insurance is required listing the Bloomingdale Park District as "Additional Insured" for \$1,000,000.

🌴 Alcohol is prohibited.

## WAIVER

I agree to abide by all the rules and regulations set by the Bloomingdale Park District. I assume responsibility for any damage to Bloomingdale Park District property during our use of The Oasis. In addition, our group agrees to hold harmless the Bloomingdale Park District and all of its officers in the event of any injuries or accidents arising out of the use of The Oasis.

Applicant's Signature \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Address on Driver's License \_\_\_\_\_  
Phone # \_\_\_\_\_

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### OFFICE USE ONLY:

Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Rental Date: \_\_\_\_\_ Rental Time: \_\_\_\_\_

### Payment:

Total \$ \_\_\_\_\_  
Passholder Discount \$ - \_\_\_\_\_  
Down Payment \$ - \_\_\_\_\_  
Total Balance \$ \_\_\_\_\_

Visa/MasterCard/Discover     Cash     Check

Receipt # \_\_\_\_\_ Initials \_\_\_\_\_ Date \_\_\_\_\_