

Splash Cove Group Visit Information and Rates

The group rate is available for groups of 15 or more paid guests wishing to visit Splash Cove. To arrange a group outing, reservations must be made by submitting a Group Visit Application at least 3 business days in advance of the requested visit date. Applications may be submitted after May 1. Payment must be received at time of visit unless otherwise approved in writing by Aquatics Supervisor.

Groups visiting Splash Cove without scheduling their visit in advance will not be eligible for discounted group rates or to receive reserved space at the pool. Non-scheduled groups will be required to pay full price admission for all group members wishing to enter the facility.

Discounted Group Rates

Children 3 and under - Free

Ages 4 and over - \$8.00

Adult chaperones - 1 free chaperone per 10 children for non-profits, day camps, and childcare or educational organizations

Group Visit Policies

1. Application must be submitted in person or via email to the Aquatics Supervisor at least 3 business days before the group visit.
2. Persons applying for a group visit must be 21 years or age or older.
3. Groups with minor participants (ages 0-17 years) must have one adult (18+ years) in attendance for every ten minors.
4. The day-of contact must be present during the group visit and is responsible for all actions and behavior of the group members. Contact should also have emergency contact information available for all members of their group.
5. All pool rules and guidelines must be followed during group visit.
6. In the event of inclement weather, refunds will be issued per the refund policy.
7. Any group that does not have adequate supervision, fails to maintain discipline, or does not follow the facility rules and regulations will be asked to leave. Refunds will not be issued and Splash Cove reserves the right to cancel future scheduled visits.
8. Groups should provide their own wristband color and designate it on their application. If you do not have access to wristbands, Splash Cove will provide them to your group for \$5.00.
9. Payment must be received at time of visit unless pre-approved by Aquatics Supervisor.
10. On the day of your visit, a representative from your group will need to check in at front desk. The pool manager will complete an orientation for your group before they are released to the facility.
11. Please notify aquatics supervisor if you are in need of bus parking.

Questions? Contact Aquatics Supervisor Danita Roseman at 217-619-8056 or danitad@decparcs.com

Decatur Park District - Splash Cove

Group Visit Application

Please complete and return to 1295 W. Wood St - Decatur, IL 62522 OR

Email Aquatics Supervisor at danitad@decparcs.com

Please fill out a separate application for each visit.

A final confirmation will be emailed to your organization. Please provide an appropriate email address.

Name of organization (if applicable):		
Main Contact Name:	Main Contact's Title:	
Main Contact Email:	Main Contact Phone:	
Day-of-visit Contact Name:	Day-of-visit Contract Phone:	
Organization Full Address:		
Organization Phone:	Organization Email:	
Do any member of your group have special needs and/or need special accommodations? __No __Yes If yes, please specify:		
Requested Visit Date:	Estimated Arrival Time: (12:00 or after)	Estimated Departure Time:
Anticipated Number of Guests: Children: _____ Chaperones: _____	<input type="checkbox"/> Pay Onsite at time of visit <input type="checkbox"/> Please Invoice after visit	
Providing wristbands? __Yes __No If yes, color: _____		

Group Visit Rate Waiver & Information

I understand the rates and terms documented above and:

- My group must have at least 15 paid guests on the day of our visit to be considered for group rate.
- Upon arrival, our group will check in at front desk to pay for the members of my group and be directed to orientation location.
- If your organization is pre-approved, an invoice will be sent for your visit and payment is due upon receipt of invoice.
- I have read and understand Splash Cove's rules.
- I will have adequate adult supervision for my members 17 and under.
- Our day-of contact and all adult chaperons will obey and enforce all facility rules with our group members.
- I am responsible for all actions and behaviors of my group during their visit to Splash Cove.

Contact Person's Signature _____ Date _____

OFFICE USE ONLY	Date Application Received _____	Group emailed _____
	Payment on-site __ yes __ no If no, date invoiced: _____	
	Final Count __ Children __ Adults Total _____ CSM Initials _____	
	Aquatics Supervisor Signature to Complete _____	

