

Monticello Community Center  
2021 Group Request

**Organization:**

Name of Group: \_\_\_\_\_ Email: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_

**Activity:**

Date Requested: \_\_\_\_\_ \*Arrival Time: \_\_\_\_\_

Age Range of Participants: \_\_\_\_\_ \*Departure Time: \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Room Request: \_\_\_\_\_

Number of Supervisors: \_\_\_\_\_ Will be eating concessions \_\_\_\_\_

**\*Due to staffing requirements for groups please call within 24 hours of any arrival/departure time changes.**

Paying here \_\_\_\_\_ Would like to be billed \_\_\_\_\_

**Fees:**

Pool/Slide/ Gym: **\$6.50/child** **\$7.50/adult**  
**Slide available for groups of 25 and over. If under you may rent the slide at \$20/hour.**

Climbing Wall: \*Flat fee for up to 15 users \$90.00 \*REQUESTING WALL \_\_\_\_\_  
\*16+ climbers cost in \$6.50 for each user  
\*Waivers are required for all users. You may get those off our website or call for fax copy  
\*Time Allotment is 2 hours unless arranged with Event Coordinator for larger groups  
\*Wall is only available depending on staff availability /Must be scheduled in advance

**Warehouse:**

\$33.00 per hour. If you are bringing in your own lunches you must rent a room. This room is highly recommended for large groups so kids have a place to go when they are tired of playing.

**Additional Information:**

1. Monticello Community Center reserves the right to cancel your visit or to divide your group into shifts if extreme conditions arise which would provide an unsafe swimming environment.
2. Supervisors and participants must follow minimum ratio requirement set by Monticello Community Center.
3. Return a signed copy of this form to the address below to secure and confirm your reservation.
4. There is a \$50 cancel fee or no show fee if you do not notify us 24 hours in advance. This will be billed to your organization.
5. Children 6 and under require direct one on one supervision with a paid adult swimmer within arms reach.

Date Submitted: \_\_\_\_\_ Signature: \_\_\_\_\_

**Do not sign-MCC to sign for approval of group**

Date Confirmed: \_\_\_\_\_ MCC Signature: \_\_\_\_\_