

Oldham County Parks and Recreation
John W. Black Aquatic Center
1551 N. Hwy 393
LaGrange, KY 40031

Come to Life in Oldham County...
Come to the Parks.



Phone: (502) 225-0656
Fax: (502) 225-0508
<http://oldhamcountky.gov>
K. Rachel Baines, Aquatic Center Supervisor
rbaines@oldhamcountky.gov

Emergency Contact: Gary Parsons, Director
(502) 417-2667

Date: March 8, 2024

John W. Black Aquatic Center Rental Agreement

Name: Oldham County Middle School / Football Team (Lessee)

Address: 4305 Brown Blvd. LaGrange, KY 40031

Phone Number: 502/222-1451 Email: shane.wilson@oldham.kyschools.us

Date: 7/25/2024 (Thursday) 7-9 pm Time: Friday – Saturday: 7:30 – 9:30 pm
Sunday: 6:30 – 8:30 pm

Please check one: ☒ ✓ Snack Bar CLOSED \$400.00 for 2 hours / 3 Lifeguards/ up to 100 guests
☐ Snack Bar OPEN \$450.00 for 2 hours / 3 Lifeguards/ up to 100 guests

Please be advised no outside food is allowed inside the Aquatic Center. All outside food must be taken to the Park or to the Patio at the entrance of the Aquatic Center. Shelters in the Park may be rented for \$40.00/day – call 502-225-0655.

Number of Guests: 48

Note: Please provide actual count of guests, so that we may have the appropriate number of lifeguards and your guests will not be turned away. We provide 3 lifeguards for up to 100 guests. 101-150 guests will require an additional lifeguard, for an additional \$25.00. 151-200 guests will require 2 additional lifeguards, for an additional \$50.00.

Total Amount Due: _____

POLICIES OF THE JOHN W. BLACK AQUATIC CENTER

- Lessee must be 25 years of age to rent the Aquatic Center.
- Reservation is secure when the Aquatic Center has received payment in full. Payment must be received at least 3 weeks prior to rental date, or the date will be released.
- Cancellations must be made at least 3 weeks before the rental date in order to receive a refund.
- Lessee is responsible for all guests' behavior. All Aquatic Center rules apply.
- Lessee will leave the Aquatic Center clean, and free of damage.
- Lessee is financially responsible for any damages, as well as any accidents or injuries sustained by lessee, employees of lessee, or guests associated with the lessee's Aquatic Center rental.
- No alcohol or drugs are allowed in the Aquatic Center or in Wendell Moore Park.
- No smoking inside the Aquatic Center.
- No DJ of any kind is allowed all music will be played on Aquatic Center speakers
- If a rental is cancelled due to weather, every effort will be made to reschedule but this cannot be guaranteed. If the rental cannot be rescheduled, a full refund will be given.

POLICY INFRACTIONS WILL RESULT IN DISMISSAL FROM THE AQUATIC CENTER AND ITS PREMISES, WITH NO REFUND. POLICY INFRACTIONS MAY RESULT IN DENIAL OF FUTURE FACILITY REQUESTS.

I have read and understand the policies of the John W. Black Aquatic Center and agree to abide by them. Full payment for this rental is enclosed.

Jason R. [Signature]
Signature

7.24.2024
Date

** PLEASE KEEP A COPY OF THIS RENTAL AGREEMENT FOR YOUR RECORDS

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4305 Brown Blvd.
LaGrange, KY 40031

W9 required on new & 1099 vendors

Tax Exempt: B-1197

Important Notice: Conflict of interest, gratuities and kickbacks are prohibited by policy of the Oldham County Board of Education

Purchases (must be approved before ordering)			
Qty.	Item #	Item Description	Total(s)
		Aquatic Center Rental for FBall Team July 25, 2024	280.00
			Estimated Total: 280.00


Sponsor Requesting Purchase

7-22-2024

¹Purchases involving changes to school site or property (indoor/outdoor) require an approved Building & Site Improvement Modification Form.

*Technology orders must be submitted to the Technology Department for purchase.

By signing below, I authorize this order and have verified there are sufficient funds available for this purchase. Hand-written signatures and dates ONLY, not typed

Bookkeeper Raylaw (certifies funds are available/being collected)

Principal Signature _____

Date Approved _____

Level Director Signature (required on purchases > \$5,000)

Date Approved _____

Superintendent Signature (required on purchases > \$20,000)

Date Approved

Account Code

Invoice Date

Invoice Number

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Kon-Gompel (K-G) (Attached)

Small Purchase
D&F (Attached)

Interdokumenten

N/A

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Check Number:

Date Paid: