

In order to keep the reservation information consistent and correct, Tim will be the only person answering questions about reservations. You may call to see if the date is available. Please call him Monday through Thursday from 8am-3pm, or email at welcht@iola.k12.wi.us. He will get back to you as soon as possible with all the correct information. He is also the only person who can reserve a date, pencil it in or confirm it.

Thank you!



FACILITY RESERVATION FORM

Please read & initial the following rules & policies:

1. Facilities will not be reserved until a completed reservation form is received by Kori Printz or Tim Welch.
2. **Most facility reservations must be submitted 2 weeks in advance of event.**
3. **Reservations for events requiring extra staffing or during non-open hours must be approved by the director.**
4. Additional charges will be assessed if there are damages to facilities or equipment.
6. Conflicting reservations are granted on a first come, first serve basis determined by the date the request is received.
7. When using the meeting room and pool, there will be no going back and forth. Use the pool first and then the meeting room.
8. Remember to return all locker keys to the front desk.
9. The facility must be cleaned by the rental group with assistance from the building staff.
10. Smoking, smokeless tobacco, and alcoholic beverages are not permitted in the facility or parking lot.
11. The I-SCF&AC reserves the right to cancel or reschedule reservations due to school district need or act of God.
12. ****\$15.00 fee for every 10 minutes you go over the scheduled time to be out of the room. (i.e. 20 minutes past end time=\$30.00)**

Initial that you read the above rules & policies: _____

Kitchen Rules

1. If your group uses the facilities equipment (you may not use the facilities paper products), your group should do the dishes. Please do not take our kitchen equipment.
2. Please clean the kitchen as best as possible.
3. Please do not leave any food in the refrigerator, take it with you.

Meeting Room Rules

1. Please take down any decorations and tape your group puts up.
2. Please clean all white boards if your group writes on them.

Initial that you read the above rules: _____

Pool Rules

1. Patrons who are not toilet trained must wear leak proof swim diapers. Please check your child's diaper periodically and take bathroom breaks.
2. Please stress to children that running on the pool deck will potentially result in injury.
3. NO food, candy, tobacco, or drinks on pool deck.
4. NO running on deck.
5. NO diving in leisure pool or the shallow end of the lap pool.
6. NO splashing, pushing, dunking, or horseplay.
7. NO personal flotation devices, floating toys or floating swimsuits.
8. NO swimming without a lifeguard employed by the facility present.
9. NO street shoes allowed in the pool area.
10. Children under 12 are not allowed in the whirlpool.
11. Children 12-16 years must be accompanied by a parent in the whirlpool.
12. **Parents with kids under 3RD GRADE MUST SWIM IN THAT POOL WITH THE KIDS!**
13. **There should be 1 adult in the water with every 5 kids. If there are 30 kids in your party, 6 adults should be in the water with kids.**

Initial that you read the above rules: _____

I have read all the rules and policies. I will make sure all rules and policies are followed by me and my guests for

445 S. Jackson St. Iola, WI 54945
Phone: (715) 445-2411, ext. 3 ~ Fax: (715) 445-5119
Email: printzk@iola.k12.wi.us or
welcht@iola.k12.wi.us

Event Contact:

Name: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Email Address: _____

Member _____ **Non-Member** _____

Signature: _____

Event Information

Today's Date: _____

Event Day & Date – 1st choice: _____

Event Day & Date – 2nd choice: _____

Event Time: _____ : _____ **AM-PM to** _____ : _____ **AM-PM****

Set-up Time (1/2 hr. no charge): _____ : _____ **AM-PM to** _____ : _____ **AM-PM**

Estimated Attendance: _____
 (Used to determine number of tables and chairs necessary, if applicable)

Please check type of event (check all that apply):

Birthday party - Age of Kids: _____

Name of Birthday Boy/Girl: _____

Swimming Party _____

Meeting Shower Banquet _____

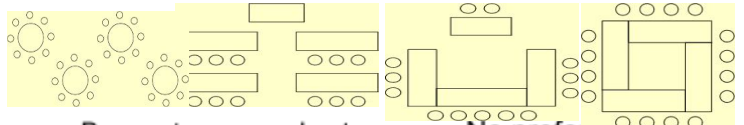
Youth Group – Name of Group: _____

Church Group – Church name: _____

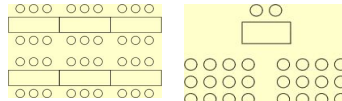
Other: _____

Set-Up (Please check one)

___ Rounds ___ Classroom ___ U-Shaped ___ Square



___ Banquet ___ Lecture ___ No preference



Facility requesting (check ONE):

*****During open swim only*****

MISHLER ROOM (w/kitchen access) -Capacity = 50

Current Members = \$45/2 hours; \$15 for each added hour

~ **\$2.00/non-member** for adults and children with the party that will use the pool or gym. No charge if your guests are members of the ISCFAC pool/gym.

Non-Members = \$75/2 hour; \$15 for each added hour

~ **\$3.00/non-member** for adults and children with the party that will use the pool or gym. No charge if your guests are members of the ISCFAC pool/gym.

***Note: Non-Members that want "membership rates" must purchase a "6 month" membership prior to room rental.**

FRALEY ROOM (no kitchen access) -Capacity = 20

Current Members = \$30/2 hours; \$15 for each added hour

~ **\$2.00/non-member** for adults and children with the party that will use the pool or gym. No charge if your guests are members of the ISCFAC pool/gym.

Non-Members = \$50/2 hour; \$15 for each added hour

~ **\$3.00/non-member** for adults and children with the party that will use the pool or gym. No charge if your guests are members of the ISCFAC pool/gym.

***Note: Non-Members that want "membership rates" must purchase a "6 month" membership prior to room rental.**

The director must approve "Off-Hours" and any other rentals.

Prices will fluctuate due to costs of staff needed.

OFFICE USE ONLY:

Reservation Received: _____ Date Confirmed: _____ Amount Paid: _____ Date Paid: _____ Initials: _____

Notes:

Form updated 12/2017 for 2018 Reservations