2012 Shakopee SandVenture Group Use Request

SHAKOPEE

SandVenture

1255 Fuller Street South
Shakopee, MN 55379

Phone: 952-233-9500
FAX: 952-233-3831

www.ci.shakopee.mn.us
parks@ci.shakopee.mn.us

Group Information

Name of Group	
Group Permit # (Office Use Only)	
Address	
City, State, Zip	
Phone	
Fax	
Contact	
# of Participants	
Age of Participants	
# of Supervisors	

Request

Request #	Day/Date	Arrival Time	Departure Time
1			
2			
3			
4			
5			

Deposit Information

Of Visits___ X $100.00 = _____Deposit Check____ Charge (Please Use Box Below)
Receipts for Deposits will be mailed within 1 Week of Request

CC #																	Visa ___ MC ___
Exp. Date	Name as it appears on card																

Additional Information

1. If the weather conditions appear questionable, the Aquatic Park may be closed. Call (952) 233-3840 for the opening status.
2. Shakopee Parks and Recreation 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.
3. Supervisors and participants must follow the guidelines in the attached letter.

I have read and agree to follow the Aquatic Park Use Policy. I understand our group will be denied aquatic park use if this policy is not followed.

_____ _____
Authorized Group Supervisor Date

Submit your permit and deposit to:
Mail: Shakopee Parks and Recreation
Attention: Sarah Foley
1255 Fuller Street
Shakopee, MN 55379
Fax: 952-233-3831
Email: sfoley@ci.shakopee.mn.us

Shakopee SandVenture Aquatic Park