



**City of Jacksonville—NICHOLS PARK SWIMMING POOL
Recreational Facilities Lease and Indemnification Agreement**

6:30PM – 8:30 PM

Reservation Date	Hours of Usage	Approximate Attendance
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THIS AGREEMENT, made and entered into this _____ day of _____, 20____, by and between the City of Jacksonville, Illinois, hereinafter referred to as the “City” and _____, hereinafter referred to as the “Lessee.”

WITNESSETH:

1. For and in consideration of the payments made by the Lessee, the City covenants and agrees to permit the Lessee to use the above specified property on the above specified date and hour(s).
2. The Lessee agrees to the strict adherence to the above specified date and hour(s).
3. Rates are for Sunday – Thursday only – two hours from 6:30 p.m. to 8:30 p.m.:
 - Up to 40 people \$200.00
 - 41-80 people \$250.00
 - Up to 100 people \$300.00
4. The city agrees to furnish utilities, maintenance and other services necessary to keep said property in a useable and safe condition.
5. The Lessee does hereby covenant and agree to indemnify and save harmless the City from all fines, suits, claims, demands and actions of any kind and nature by reason of any and all of its operations hereunder and does hereby agree to assume all risk in the operation of this LEASE AGREEMENT hereunder and shall be solely responsible and answerable in damages for any and all accidents or injuries to persons, or property, and further agrees to abide by the rules and regulations of the Nichols Park Swimming Pool as posted on said premises and as follows:
 - All persons using the deck or the pool must be dressed in swimwear.
 - No running, pushing, dunking, fighting or other rowdiness is allowed.
 - No glass bottles, food, gum, smoking or balls, except beach balls, are allowed on deck or in the pool.
 - Showers must be taken before persons enter the pool.

IN WITNESS WHEREOF, the parties hereto have caused this instrument and two (2) copies of like tenor and date to be executed in their respective names by the respective duly authorized officers as of the date and year first herein above written.

CITY OF JACKSONVILLE
Angela Salyer, City Clerk

LESSEE _____
Address _____
Phone _____

By City Clerk Representative

FEE PAID \$ _____ **CR#:** _____

ANGELA SALYER, CITY CLERK
200 West Douglas, Jacksonville, IL 62650
City Clerk: 479-4613 / Nichols Park Pool: 479-4643