



P. O. Box 106 · Ocean Springs, MS 39564

228-875-0086 · www.TreasureOak.org

### Pool Area Reservation Request

Member Name:	_____	Date Requested:	_____
Email address:	_____	Start Time – End Time:	_____
Home Phone:	_____	Number of TOCC Members:	_____
		Number of Non-Members:	_____
		<u>Total Guests: (50 Max):</u>	_____
		Deck/Patio Area Requested:	_____
Office/Cell:	_____	East Deck, West Deck, Patio	_____
	_____	(Max 2 Tables in Patio)	_____
			_____

Please describe the Event (Maximum 50 Attendees) \_\_\_\_\_

#### Please indicate the type of event:

Member Functions are events in which the member is the primary host of the event and is personally responsible for the event and is personally responsible for the fees. The Member Function courtesy rates are extended to a member, whether the event is personal or professional, as long as the member is the person putting on the event and paying for it.

Member Sponsored Functions are events in which the member vouches for the primary host of the event and the non-member is responsible for the fees. In addition, by agreeing to sponsor the non-member host, the member takes on responsibility as a "co-signer" to ensure all policies and procedures are followed. All fees for Member-Sponsored Functions must be paid seven (7) days in advance of the event. Non-payment will result in a cancellation of the scheduled event.

#### Please read the following and sign below indicating your understanding and acceptance of these terms.

- I agree to accept the pool area in "as is" condition and to only use the area for the purposes requested on the date and time indicated above. I understand that I am responsible for the conduct of all of my guests. I also agree to comply with the rules and regulations of Treasure Oak Country Club regarding use of the pool and I am aware that the lifeguards instructions must be obeyed at all time. I agree to surrender and yield possession of the pool area before expiration of the reserved period if verbally directed by the Club Manager, any Trustee, or any Board Member.
- I will make arrangements to have one lifeguard present per 15 party guests (all minor swimmers or non swimmers). **TOCC members are included when calculating the amount of lifeguards needed, according to Red Cross Guidelines.** This is mandatory and no exceptions are made. The club lifeguard on duty is not available to assist with parties or scheduled events. Lifeguards must be paid directly by the party host. \$10 per hour minimum. Tipping the lifeguard is allowed and encouraged for exceptional service.
- I will remove all trash from my area and take it to the dumpster. I will remove all decorations and return the furniture to its original position. Failure to do so may result in a cleaning charge of \$30 being assessed to the member.
- I agree to indemnify and hold harmless Treasure Oak Country Club, its Board of Directors, its Management, Officers and Employees against any damages, claims, injuries, or expenses arising out of use of the pool area.
- If alcohol will be present, TOCC reserves the right to require that you arrange for adequate security for your function. Security is \$20 per hour, per officer. There is a four hour minimum for the security guard and security must be arranged 3 weeks in advance. Security for club functions is provided by Dirk Thompson, who can be reached at 228-860-0813.

Pool Area Rental Fees			
Member Event	\$50	Additional Fee for Non-Members	\$3
Member Sponsored Event	\$100	Additional Fee for Non-Members	\$5

All party hosts must have attendees sign in. A sheet will be provided to the host for this purpose. The sheet should be turned into the party lifeguard at the end of the party.

Please remember the TOCC Pool Area is a SMOKE-FREE area. Smoking is allowed 20 feet outside of the fence.

Please contact Angela or Steve at the club office if you have questions, at 228-875-0086 or email [tocbookkeeper@cableone.net](mailto:tocbookkeeper@cableone.net). Thank you, and enjoy your event!

TOCC Lifeguards available for booking:

**\*\* See attached lifeguard listing \*\***

Please notify office staff with the name of the lifeguard(s) that you have booked.

Thank you for your assistance!

Members Signature:		Date:	
Board Approval:		Date:	
Exceptions Approved by Board:			