

HOW TO HAVE A PARTY

- A. Any resident in good standing may reserve a portion of the Swim Club area for a party.
- B. Only one party may take place during the same period of time.
- C. A resident (over the age of 21) must host all parties and must remain in attendance for the entire party.
- D. Resident is responsible for set-up at the beginning of the party and clean up at the end of the party. All tables and chairs need to be moved back to their original position. The goal is that the pool area looks the same at the end of the party as it did upon your arrival.
- E. During the entire duration of the party, there must be a minimum of 1 adult for every 4 children under the age of 14.
- F. A Pool Rules Advisory Committee member must approve parties larger than 10 guests at least two weeks prior to the event. **(A “Request for Swimming Pool Party” form may be obtained from the Foxborough website, Hunters Ridge website or through the Foxborough Management Company must be completed by the resident and sent to the Foxborough Management Company (Michael Reynolds, michael@ymginc.com))**
- G. There are no lifeguards available to monitor parties. Party goers assume the liability of swimming in an unguarded pool, and the party who made the reservation will be responsible for all party goers.
- H. Parties may not be scheduled on legal holidays.
- I. Parties scheduled during posted Swim Club hours must allow for others to use the pool. The party host is responsible for ensuring that other pool patrons are not inconvenienced.
- J. Reservations containing over 20 attendees will not be allowed on the weekends.
- K. It is the responsibility of the Resident to communicate all pool rules to all party guests.

ALL PARTIES MUST BE IN COMPLIANCE WITH CURRENT JOHNSON COUNTY HEALTH
REGULATIONS

Party Request Form

Requested date of party_____

Start time _____ End time_____
(no later than 1/2 hour before regular pool closing)

Number of adults 21 years and over

Number of attendees age 14 – 20

Number of attendees under the age of 14

Total attendees _____

Rain date requested, if applicable

By signing this request, I acknowledge I have read, understand and agree to abide by the Foxborough Swim Club Rules and Johnson County Health Regulations in effect the date of signing. I also agree to communicate rules to my guests.

Resident Name _____

Address _____

Phone _____ Email _____

Signature: _____ Today's Date _____

Submit form at least two weeks in advance of the party to:

Young Management Group
Email –michael@ymginc.com
Phone – 913-890-2310