



DAY CAMP RESERVATION

These daily group/day camps spaces are limited and require this reservation form to be turned in for specific dates and times with advanced notice. Email or bring to the Liberty Lagoon ticket office to complete reservation.

Organization Name: _____ Phone: _____

Organization Contact Person: _____ Email: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Date of Event: _____ Expected Attendance: _____ Youth _____ Adult

Time of Event: _____ [Mon-Thurs. 11 a.m.-6:30 p.m. / Fri. 10 a.m.-6:30 p.m.]

All Guests: \$12 X QUANTITY _____ = _____

48" + Shockwave: \$17 X QUANTITY _____ = _____

Discounted Rate: \$9 X QUANTITY _____ = _____
(MUST HAVE 250+ TO QUALIFY)

ALL Slides and Shockwave have a minimum height of 48" and maximum weight of 300 lbs. to ride.

Consent - Initial below to acknowledge and consent to each of the following:

_____ ALL GUESTS who enter the facility must purchase a ticket regardless of participation.

_____ No outside food or drinks allowed

_____ No alcohol or smoking inside the Liberty Lagoon facility or on any BREC property (City Ordinance).

_____ Day camp is responsible for cleaning, disposing of thrash in appropriate cans, and returning lifejackets.

I acknowledge that this agreement contract can be cancelled/terminated at any time if Facility Rules and BREC Facility Use Policies are not followed or need to be enforced. Applicant hereby acknowledges receipt of the general facility use policies. Applicant accepts all terms and conditions set forth herein together with rules, terms, and conditions of any policies as established by the Recreation and Park Commission for the Parish of East Baton Rouge - BREC.

Organization Representative Signature: _____ Date: _____

LIBERTY LAGOON

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