

# **Antioch Water Park**

4701 Lone Tree Way, Antioch, California 94531 (925) 776-3070 Phone (925) 776-3078 Fax Émail: waterpark@ci.antioch.ca.us



## **Group Ticket & Party Package Information**

Discounted group tickets can be purchased for groups of 10 or more guests during general admission hours. Reservations must be paid for at least 3 days prior to the requested date. The Group Coordinator may purchase additional group tickets at the discounted rate on the day of the event. Tickets are only good for the date requested and are nonrefundable.



### Information

- Tickets will be issued in the form of a scan card. The card will be issued to the Group Coordinator upon check-in; he/she will be responsible for the card. It is recommended that groups try to arrive together. Any guests arriving late will need to be scanned in by the Group Coordinator. .
- Tickets are good only on the requested date. No refunds.
- Party packages, seating areas and shade structures are available for an additional fee.
- Guests will be measured and wrist banded according to height by Water Park staff.
- Concessions are available or you may enjoy your own picnic lunch inside the park. **No glass** containers or alcoholic beverages permitted.
- Unfortunately, no pets are allowed in the water park, with the exception of service animals. Service animals are not permitted in the water.
- Mylar balloons are not permitted.

### Park Courtesies:

- Guests must comply with park rules and requests of park staff.
- Wristbands are required for all guests over 30" tall and are mandatory for slide use.
- No running. Walk with caution when the surface is wet.
- All bags are subject to search.

#### Dress Code:

- Snorkels, face masks, and fins are not permitted.
- No street clothes or metal allowed on slides.
- Swim diapers are required for all diapered guests.

No personal floatation devices may be brought into the park, with the exception of Coast Guard approved Type 3 life jackets.

#### We encourage all guests to:

- Wear water shoes on deck.
- Bring refillable water bottles.
- Wear sunscreen.
- Arrive together.
- Report all injuries to park staff.
- Lock vehicles and hide all valuables.



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**Group Ticket & Party Package Reservations** 

Group Coordinator Last Name:	First Name:								
Address:	City:				Zip Code:				
Primary Phone: ()	Secondary Pho			<mark>Phone:</mark> (	<mark>::</mark> ()				
E-mail: Date of Birth:									
Alternate Contact:	Relationship:				Phone: ()				
Organization Information (if applicable)									
Organization:									
Organization Address:	City:			Zip Code:					
Primary Phone: ()									
Requested Date(s):	Sun	Mon	Tue	Wed	Thu	Fri	Sat	(circle one)	
Group Ticket Reservations must be paid by 5:00pm at least 3 days prior to the requested day.									
No exceptions.									
Small Group    • Weekdays - \$12 per ticket    • Weekends and Holidays - \$14 per ticket    • 10 Ticket Minimum    Number of tickets:  x \$12 =\$			Shaded Picnic Area    • 4 area's available to rent    • 5 tables per picnic area    • 11am-2:15pm \$35    • 2:45pm-6pm \$35    • All Day! \$65						
Large Group• Monday – Friday only• 50 Ticket MinimumNumber of tickets: x \$11 =\$			Food Package    Add Food! Receive: A Party cup with free refills all summer, a hot dog and a bag of chips!    10 purchase minimum.   x \$6 =\$						
I understand that the date requested above is not confirmed and approved until a contract is signed and payment is made. All agreements must be in writing, NO verbal approvals or agreements.									
Signature:Date:									
THIS IS A WAIVER AND RELEASE. READ IT CAREFULLY BEFORE YOU SIGN IT. My signature certifies that I have read the conditions as set forth by the City of Antioch governing the use of the items specified above; that I will take full responsibility for seeing that the use of these facilities/area by the organization/group I represent is in full adherence and compliance with these conditions; that I will hold the City harmless from any damage, claim for damage for personal injury or death, damage to or loss of property incurred in the use of these facilities/area; that if there are any minors in the group using these facilities/area, I will accept full responsibility for them throughout the period covered by this Department Applicant Permit. I HAVE READ THIS RELEASE, AND I UNDERSTAND AND ASSUME THE RISKS INVOLVED. BY SIGNING, I GIVE UP MY RIGHT TO SUE. Signature:									
•			<mark></mark>						