

PAVILION RESERVATION APPLICATION REQUEST

Date: _____

Name of Applicant: _____

Address: _____

Resident Non-Resident (Circle One)

Telephone # : Home: _____ Cell: _____

Date/Time Requested: _____

Reason for Request: _____

Number of People Attending: _____

FEE SCHEDULE

<u>Pavilion Only</u>	<u>Fee</u>	<u>Refundable Deposit</u>
Resident	\$35.00	\$75.00
Non-Resident	\$75.00	\$125.00
<u>Pavilion & Kitchen</u>	<u>Fee</u>	<u>Refundable Deposit</u>
Resident	\$75.00	\$75.00
Non-Resident	\$125.00	\$125.00

I agree that I have received and read the Trumbauersville Veteran's Park Rules

Signature of Applicant: _____

OFFICE USE ONLY:

KEY CODE TO ACCESS KITCHEN: _____

DEPOSIT RECEIVED: AMOUNT: _____ CASH _____ CHECK # _____

The deposit will be returned to the applicant if the area reserved is cleaned up to the satisfaction of the Code Enforcement Officer (CEO) or inspecting Borough Official.

APPROVED/DISAPPROVED: _____ (Borough Official)