APPLICATION FOR USE OF RECREATION FACILITIES

Parks & Recreation Department

Location **Temple City Park** Facility Desired **Pavilion**

Day_____Date_____Hours:_____ To _____

Type of Activity _____ # Attending _____

Name of Organization: _____

_____
Applicant Name & Title

_____
Applicant's Address

_____(_____)_____
City Telephone

Please check if event will be open to: _____Public _____Members/Guests

Is a charge of any kind to be made? ___Yes ____No If yes, please describe _____

If funds are to be raised, please describe purpose _____

I certify that I will abide by the Rules and Regulations and accept the conditions stated.

_____ _____
Signature of Applicant Date

Do Not Write Below This Line

Is facility available? _____Yes _____No Proof of residency _____

Comments: _____

FEE SCHEDULE

PAVILION	FEE (Minimum 2 hrs.)	DISPOSITION OF REQUEST
Rental $40 per hr. x hrs. =	Receipt # Date Pd.	Request approved by: Request denied by:
Security Deposit $300	Receipt # Date Pd.	Insurance Endorsement Received ____ Receipt # Date Pd.
TOTAL CHARGE: $		