

AYNOR TOWN PARK
APPLICATION FOR USE OF PARK

Name of Organization _____

Name of Individual Making Request _____

P.O. Box or Street _____

City _____ State _____ Zip _____

Phone Number of Contact Person _____

Description of event for which facility will be utilized: _____

Date Requested _____ Reservation Time _____

Cleanup **EVERYONE USING THE PARK MUST CLEAN UP AND LEAVE THE PREMISES AS THEY FOUND IT.**

Rules **SIGNING OF THIS APPLICATION INDICATES THAT YOU HAVE RECEIVED AND READ THE PARK RULES AND WILL ABIDE BY THESE RULES SETFORTH.**

Independent Contractors, such as Caterers, Decorators, Photographers, etc.... that you use for an event/activity held at this facility must have a Town of Aynor Business License. Please list name and contact information any of the above that you plan on using:

Person submitting request: _____
Signature _____ Date _____

Approved _____ Date _____
Aynor Town Clerk