

PARK SQUARE / MOORE'S LAKE REQUEST FORM

DATE FORM COMPLETED: _____

NAME: _____

ADDRESS: _____

PHONE: _____

PARK REQUESTED: _____

DATE REQUESTED: _____

TIME REQUESTED: _____

PURPOSE: _____

DATE FEE PAID: _____

THERE IS A NON-REFUNDABLE FEE OF FIFTY (\$50) FOR THE USE OF THE PARK.

I (WE) AGREE TO ABIDE BY THE ATTACHED RULES AND REGULATIONS.

SIGNATURE

APPROVAL: _____
CHIEF CLIFF ENGEL

DATE: _____