CITY OF EAGLEVILLE PARK RESERVATION APPLICATION

(Please Print Legibly or Type) NAME:	DATE:
ADDRESS:	
CITY:	STATE: ZIP:
PAVILION RENTAL	BALL FIELD RENTAL
DATE DESIRED: / / MONTH DAY YEAR	TIME DESIRED:
DESCRIBE OCCASION/EVENT:	
PAVILION RESERVATION FEE PAID: PAVILION REGULATIONS RECEIVED:	4 HOURS \$25.00 ALL DAY \$50.00
BALLFIELD RESERVATION FEE PAID: DEPOSIT: PER FIELD/PER DAY: PER FIELD/PER DAY ADDITIONALLY FOR USE OF PER FIELD/PER DAY ADDITIONALLY FOR USE OF PER ADDITIONALLY DRAG OF FIELDS: PER BAG OF DIAMOND DRY:	•
\$1,000,000.00 PROOF OF LIABILITY INSURANCE NAMING THE INSURED MUST BE SUBMITTED ONE WEEK PRIOR TO THE SCH	CHEDULED DATE.
MAKE PAYMENT TO THE <u>CITY OF EAGLEVILLE</u> . YOU MAY MACCITY OF EAGLEVILLE P.O. BOX 68 108 SOUTH MAIN STREET EAGLEVILLE, TN 37060 AGREEMENT I HAVE RECEIVED, RED AND AGREE TO ABIDE BY ALL EAGLEVILLE AND CONDITIONS CONTAINED HEREIN:	
APPLICANT SIGNATURE: DAYTIME PHONE(S) NUMBERS:	