

TOWN OF NEW CHICAGO

PARKS AND RECREATION

NEW CHICAGO, INDIANA

Purpose of Rental: _____

Park Requested: _____

Date of Application _____ Date Requested _____

Time of Use: From _____ a.m. p.m. To _____ a.m. p.m.

Name: _____ Phone: _____ Cell: _____

Address: _____ City: _____

INDIVIDUAL REPRESENTING ORGANIZATION OR GROUP _____

The undersigned shall be responsible for seeing that all Park Rules and Regulations shall be adhered to and be responsible for any damages incurred. This includes restroom facilities.

Signed: _____

Address: _____ Phone: _____ Cell: _____

Rental Fees _____

Deposits _____

TOTAL _____ Date _____

Type of Payment (circle one) _____

Cash M.O. Check# _____

Rec'd. by: _____

ALL FEES AND DEPOSITS PAYABLE AT TIME OF REGISTRATION

No refunds without a receipt

White - Office

Canary - Customer

Pink- Parks Dept.

FACILITIES DESIRED

- Shelter No. 1 North
- Shelter No. 2 South
- Restrooms Facilities
- Concession Stand