

**ZEBULON PARKS AND RECREATION DEPARTMENT
FACILITY RESERVATION FORM**

Name of Applicant: _____

Address: _____

Home Phone: _____ **Work Phone:** _____

Facility Requested: _____

Date Requested: _____ **Time Requested:** _____

Occasion (birthday party, family reunion,...): _____

Number of Adults Expected: _____ **Number of Children expected:** _____

Significant items you plan to bring (grills, pig cookers, music,...): _____

I agree to abide by all rules and regulations established by the Zebulon Parks and Recreation department, and will ensure that the park is clean for patrons who follow. I hereby request that this application be accepted for use of the designated facility managed by the Zebulon Parks and Recreation Department. I, in no way, will hold the Town of Zebulon or the Parks and Recreation Department liable for any accident or injury that may occur while utilizing the park.

Signature: _____ **Date:** _____

Office Use Only

Acceptance ? _____ Amount Charged \$ _____ Amount Paid \$ _____

Special Instructions _____

**** Please note that your registration is NOT COMPLETE until we receive your reservation form and payment. Please call Zebulon Parks and Recreation to inquire about available dates (919-823-1815)****