



BHS PARK PAVILION USE CONTRACT

Officer: Y / N

217 Main Street Hiram, Georgia 30141

Scheduled

Ph: 770-943-3726 x201 Fax: 770-439-2372

Weekend Park Ranger : Leroy Goodwin / 770-943-3726 x211

*Please fill in all yellow highlighted areas below.

Time: _____

Rental Date: _____

(Must Include Set Up/Clean Up Time)

Pavilion: (circle one) #1 #2
Sun / Mon / Tue / Wed / Thu / Fri / Sat

Pavilion Rate: Mon - Sun: 3 hours @ \$ 35.00 (Minimum Rental)
Additional Hour(s) rate: \$5.00/ hr.

Rental Fee: The total rental fee must be paid in full at the time the contract is signed and submitted for the requested rental dates. If you must cancel your reservation, a refund will take place in accordance with the cancellation policy stated in the attached Rules/Regulations.

Type of Event: _____

Number of expected attendees: _____

Time attendees expected to arrive: _____

Person Reserving the Pavilion: _____

(Must be at least 21 years of age. Copy of Driver's License Required)

Current

Address: _____

City: _____ **State:** _____ **Zip:** _____ **Email:** _____

Home Phone: _____ **Alternternate**

Phone: _____

The undersigned individual/group agrees to abide by all policies of THE CITY OF HIRAM as stated in the "Rules and Regulations " provided to them and understands that violation of any policy would be cause for the individual or group to be barred from using the facility .

Lessee Signature _____

City of Hiram Representative Signature

NO ALCOHOL /TOBACCO: _____ **NO ELECTRICITY OUTLETS/LIGHTS :** _____

Initials

Initials

FOR OFFICE USE ONLY:

PAYMENT/RECEIPT INFO:

TOTAL FEE : \$ _____ Cash / Check # _____ Receipt Given: By: _____ Date Pd.
: _____

CANCELLATION DATE: _____ Received by:
