Elmwood Charter Township

10090 E Lincoln Rd Traverse City, MI 49684 (231)946-0921

PAVILION RESERVATION REQUEST FORM

Pavilion requests will be accepted no sooner than six (6) months before the desired reservation date.

BEFORE SUBMITTING THIS FORM, CALL THE TOWNSHIP TO CONFIRM AVAILABILITY

Person/Organization F	Requesting Pavilion	on Reservation:			
Mailing Address:					
City/State/Zip:					
Phone:		Email	:		
If Different, Deposit R	efund Check Nam	ne:			
Deposit Refund Check	Address:				
Deposit checks will be acceptable condition.	mailed approxim	nately 2 weeks	after reservation	date if the p	avilion is left in
Pavilion Requested:	Greilickville Ha	rbor Park Pavili	on Cherr	y Bend Comn	nunity Park Pavilion
Date:					
Day of the Week:	Monday	Tuesday	Wednesday	Thursday	
	Friday	Saturday	Sunday		
Rental Time: Half 10:0	Day 00 AM – 2:00 PM		0ay PM – 7:00 PM		ll Day :00 AM – 7:00 PM
Note: Due to limited p	oarking, Greilickvi	lle Harbor Park	can only accomr	modate a ma	ximum of 75 people.
THE RENTAL FEE AND	DEPOSIT ARE DU	JE AT THE TIME	OF SUBMITTAL	TO SECURE I	RESERVATION.
<u>Greilickville Harbor Park</u> Half Day \$100 Full Day \$200 Deposit \$50 I acknowledge that I have read the Elmwood Ch		Half D Full D Depo	Cherry Bend Park Half Day \$50 Full Day \$100 Deposit \$50		
available online (<u>www.</u> within 7 days of event	v.elmwoodmi.gov) and I agree to	•	-	
Signature:	Date:				
OFFICE USE Amount Paid:		_	Received By: _		
Cash/Check #:	Date Received:				

Last Rev. 7/23