City of Rockaway Beach 276 S. Hwy 101, P.O. Box 5 Rockaway Beach, OR 97136 503-374-1752

Phyllis Baker Park Facility Reservation Request Form

Name:		Today's	Date:	Reservation Date:	
Address:					
Street		City	State	Zip	
Home Phone:	Alterna	ate Phone:	Email:		
	Picnic Area	and Picnic Shelter/	West End		
\$40.00 per ½ day (4 hours)					
\$75.00 per full day (8 hours)					
	\$100.00 refunda	\$100.00 refundable deposit			
Hours of use:Approximate number of people to attend:Electricity					
Type of Activity for Pa	ark Use:		Detailed Descript	ion of Activities:	
return the park groun use. I agree to provide when I leave if the siz agree to pay for any d understand that liabil	nds and facilities base a garbage recepta e of my event surpal lamages to the gro lity insurance in the Beach listed as the	ack to a state compa acle and to remove t asses the capacity o unds or facilities ca ae amount of \$2,000	rable to their origing the garbage and recount of the provided garbassed by any membe 000.00 is to be pure	uration of my use and to hal condition at the end of my eptacle from the premises age receptacles. I further of my group during use. I chased at my expense, with my reservation does not close	
Signed:		Dated	l:		
Date Received:		_ Time Receive	·d:		
Received By:		<u>-</u>			
Park Rental Fees: Amount Paid:					
Cash/Check#:				e Receptacle:	
Rece	eipt#:				