## **HELPER CITY PARK RESERVATION**

LION'S PARK PAVILION	
PARKWAY PAVILION	KITCHEN
LOCUST STREET PARK PAVILION	
Name or Group Reserving Park	
Address:	
Contact Phone Numbers:	
Date of Event:	
Total Cost:\$30.00 Paid(I	Date)
I, the undersigned, hereby make application to Helper Cit time stated. I will insure that the facility is clean and tras	
(Signature of Person Responsible)	(Date)
NOTE: No refunds due to weather or cancellation unless advance of reservation date. Payment must be received b	
OFFICE USE ONLY:	
KEY ISSUED:(SIGNATURE)	(DATE)
	(22)
(CITY EMPLOYEE)	(DATE)