CITY OF CONCORD

P. O. Box 175 CONCORD, GA. 30206

770-884-5221 FAX 770-884-9666 cityofconcord@bellsouth.net concordga.com

RESERVING THE PAVILION

Name:			
Address:			
Contact Phone #:			
Cost to reserve the Pavilion if you do not deposit required (city employee will inspwill be refunded).			
Payment must be received two weeks p written separate from reservation pay	-	erve date. The depo	osit check must be
Date:	_		
Time:	_		
Check if you need one or both of the foll	lowing:	electricity	water
I will not use the Pavilion or Gazebo to proform I am agreeing to forfeit my \$50.00 or Gazebo.			
Signature		Date	
Print Name Here			

NO INFLATABLES & NO ALCOHOL ALLOWED IN PARK