

# Request to use THE COMMUNITY PARK OF IRMO PICNIC SHELTER

Date of request: \_\_\_\_\_

**Date of Function:** \_\_\_\_\_

Purpose of Function: \_\_\_\_\_

Hours the **Picnic Shelter** will be used: \_\_\_\_\_ to \_\_\_\_\_

Number of Guests: \_\_\_\_\_

Electricity Needed?                      YES                      NO

Requestor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

PLEASE HAVE DRIVER'S LICENSE READY SO WE CAN MAKE A COPY.

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DEPOSIT: \_\_\_\_\_ RENTAL FEE: \_\_\_\_\_

## FOR OFFICE USE ONLY

Date of Security Deposit/Rental Fee: \_\_\_\_\_

Amount of Check/Cash/MC \_\_\_\_\_

Receipted By: \_\_\_\_\_

Date Security Deposit Refunded to Requestor: \_\_\_\_\_