

**TOWN OF WALWORTH
PARKS & RECREATION DEPARTMENT
3600 Lorraine Drive
Walworth, NY 14568
315-986-1400 ext 312**

Cash _____
Check _____
Check number _____

Ginegaw Park Pavilion Reservation Form

Person Reserving Pavilion: _____

Address of Above: _____

Phone Number of Above: _____

Group Reserving Pavilion: _____

Resident _____ Non-Resident _____ Size of Group: _____

Purpose for Reserving Pavilion: _____

Date of Reservation: _____

Time(s) Reserving: _____

Approved By: _____ Date Approved: _____
Jacqueline VanLare, Parks and Recreation Director

I have read the rules and regulations pertaining to park/pavilion use in the Town of Walworth and agree to same.*

The restrooms designated for the Open Air Pavilion use are the Porta Potty next to the pavilion and the restrooms at the front of the park.

In addition, I hereby agree that we will not hold the Town of Walworth responsible for any actions/injury resulting from our use of the park/pavilion on the above-mentioned date(s).

Date: _____ Signature: _____

*Please be aware that the Town of Walworth may impose limitations upon park use as necessary at any time. If this is a second request for a pavilion this calendar year, you may not reserve the pavilion until one week before needed date, so everyone will get an equal opportunity to use the pavilion.

Walworth Parks Department