



City of Holts Summit Park Rental Application

The mission of the City of Holts Summit is to provide a safe, livable, and sustainable community for our present and future citizens

Available Parks for Rent:

Greenway (No Open Bathrooms): _____

Hibernia: _____

Reservation Information:

Name of Renter: _____

Date of event : ____ / ____ / ____

Time of the event: ____ AM/PM— ____ AM/PM

Rental Fee Total :\$25.00

Refundable Deposit Total: \$25.000

Applicant Information:

Purpose for renting the facilities: _____

Expected Attendance: _____

Applicants Full Name: _____

Address: _____

Contact Number: () -

Email: _____

Copy of ID Attached: Yes No

Drivers License Number: _____

Answer the Following:

1. Will the purpose for your reservation interfere with or detract from the general publics enjoyment of the park during your event? ____ Yes ____ No
2. Will your reservation detract from the promotion of public health, welfare, safety, and recreation during your event? ____ Yes ____ No
3. Will your reservation entail unusual, extraordinary expense, burdensome expense, or police operation by the city during your event? ____ Yes ____ No
4. Is the reservation date requested for the park available? ____ Yes ____ No

OFFICE USE ONLY

Security Deposit Receipt/CC Number: _____ Amount: _____

Rental Fee Receipt/CC Number: _____ Amount: _____

Date is on Online Calendar: _____ (Initial) Date is on Wall Calendar: _____ (Initial)

Signature of Employee: _____

Date Deposit was received: ____/____/____

Date deposit was returned: ____/____/____ Returned by: _____ (Initial)

Amount Returned: \$ _____ Returned To: _____

Returned by Check

OR

Credited back onto Credit Card

Check #: _____

Confirmation Number: _____

Notes: _____
