



CITY OF ROGUE RIVER

133 Broadway • Box 1137 Rogue River, Oregon 97537 • (541) 582-4401

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PARK PAVILION RESERVATION NO. 25-_____

Reservation Date: _____ Name of group/party: _____

Name of person making deposit: _____

Address: _____ Cell/Home: _____

Business: _____

(Please provide an address for deposit return if different from listed above)

Arrival time: _____ Departure Time: _____ *(Area must be vacated by sunset unless otherwise indicated)*

Rehearsal Date/Time: _____ Wedding Ceremony Time: _____

Anticipated number of people attending the event: _____ Amplified music (large speakers): Yes No

Special considerations/equipment/electricity: _____

Parking/Traffic Plan: _____

Area reserved must have a representative of the group on the site by the time listed above.
Area not occupied by representative by stated arrival time shall be declared open to the public.

**ALL OTHER AREAS OF THE PARK ARE OPEN TO OTHER VISITORS,
AND PROTECTED UNDER ORS 105.682 - RECREATIONAL IMMUNITIES**

Damage/Cleaning Deposit: \$100.00 Date paid: _____ Amount: _____ Receipt # _____

Entire Park Reservation Fee: \$500.00 Date paid: _____ Amount: _____ Receipt # _____

**requires City Council Approval; 10 days prior to mtg* Date submitted: _____ Requesting: _____

If the event is canceled less than thirty (30) days from the reservation date, all fees will be retained by the City.

PLEASE BE ADVISED THAT PARKING IS LIMITED - (be sure to read parking information provided with application)
over 20 attendees requires a Parking/Traffic Plan to be submitted

IN CASE OF EMERGENCY DIAL 911, OR CALL PUBLIC WORKS AT 541.659.6144

Applicant's Signature _____ Date _____ E-Mail Address *(print clearly)* _____

For Office Use Only:
CANCELLATION Date: _____ Name: _____ Phone: _____

Reason: _____ Taken by: _____

DEPOSIT REFUND: Date: _____ Check #: _____ Amount: _____ Auth: _____



We are an AAEOE and comply with Section 504 of the Rehab. Act of 1973

"Home of the National Rooster Crowing Contest"



PARK RESERVATION REPORT

(For Public Works Use Only)

RESERVE SIGN INSTALLED: YES ___ NO ___

POWER ON: YES ___ NO ___

CONDITION OF PARK BEFORE EVENT:

RESTROOMS _____

PICNIC AREA _____

POWER _____

PARKING LOT _____

TRASH _____

COMMENTS: _____

EMPLOYEE SIGNATURE

DATE

CONDITION OF PARK AFTER EVENT:

RESTROOMS _____

PICNIC AREA _____

POWER _____

PARKING LOT _____

TRASH _____

VANDALISM - EXPLAIN: _____

OTHER COMMENTS: _____

EMPLOYEE SIGNATURE

DATE

For Office Use Only:

REFUND: YES ___ NO ___ DATE _____ APPROVED BY: _____