

Address: 1 Max Lockwood Drive
Statesboro, GA 30458



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Pavilion Rental Confirmation

Facility (please check): Mill Creek Pavilions: 1 2 3

Nevils Pavilion Stilson Pavilion Brooklet Pavilion

Name of Individual /Organization: _____ Date of Birth: _____

Contact Person of Organization: _____

Mailing Address: _____
(Street) (City) (State) (Zip Code)

Telephone Number: _____
(Home) (Work) (Cell/Other)

E-Mail Address: _____

Day/Date of Rental: _____

Time of Reservation: Time In: _____AM PM Time Out: _____AM PM **Total Hours:** _____
***Your time of reservation **MUST** include your set up and clean up time. Your set up before and clean up after must take place within your rental time.*

Type of Rental (Birthday Party, Family Reunion, Youth Dance, Etc.): _____
*** Depending on the type of rental, a security guard may be hired at the renter's expense if deemed necessary by Bulloch County Recreation and Parks*

Number of People Expected to Attend: _____ Age Group of People Attending: _____
If room is reserved for minors, how many chaperones will attend _____
*** A minimum of 1 chaperone to 20 children is required.*

This is a confirmation of the reservation that I have made with Bulloch County Recreation and Parks. I understand that my reservation is not complete until the rental fee and deposit is paid and a facility reservation contract form is completed. By signing below, I am confirming the above information to be correct and that I have read, understand, and been given a copy of the facility rental procedures and will abide by them.

Renter's Signature: _____ Date: _____

.....OFFICE USE ONLY.....

Rental Fee Due: _____ Paid: YES NO Security Deposit: _____ Paid: YES NO Permit # _____

Staff Making Reservation: _____ Date: _____