

## **CITY OF TURRELL - EVENT PERMIT RESERVATION FORM**

<u>Applicant Information</u>	
Name:	Address:
Phone Number:	Email:
<b>Event Details</b>	
Event Name:	Event Type:
Event Date(s):	Start Time:
End Time: Estimated Nur	mber of Attendees:
Park Facilities Requested	
Facilities Needed (e.g., Pavilion, Restrooms, E	Electricity):
Event Location  Location Description (include street names, parking lot names, etc. ):	
Overview of Event:	
Distinctive Features:	
<u>Dates and Times</u>	
Hours of Operation:	Site Preparation Start Date/Time:
Dismantling/Cleanup Date/Time:	
<u>Tents/Vendors</u>	
Types of Vendors Present:	
not responsible for any injuries, damages, or l	es and regulations. I understand that the City of Turrell is losses that occur while using the park facilities. I also ll attendees and for any damage to park property.
Signature of Applicant:	Date:
City Approval	
Approved By:	Title:
D .	