Special Use/Event Request Form

Contact Name: ____________________________________________________________

Group/Organization: ______________________________________________________

Address: ________________________________________________________________

City: _________________________ State: ____ Zip: ________

Phone: _____________________ E-mail: ___________________

Day of Event Contact Person/Phone: _________________________________________

Event or Program Information (Site Plan must be attached):

Name of event or service: ____________________________________________________

Date(s): __________________________________________________________________

Time(s): __________ Set Up: __________ Start: ___________ End: _______________

Park/Trail Requested: _______________________________________________________

Facilities Required: _______________________________________________________

Equipment Set up: _________________________________________________________

Anticipated Attendance: ______________________________ (Staff/Volunteers) ________________ (Spectators/Participants)

Description of event or program: (please include any signage, trail route map, use of audio equipment or communications, entrance fees and concession requests that may be a part of the event.

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