



822 West Liberty, Sumter, South Carolina 29151 \* 1-800-688-4748 \* 1-803-436-2640 \* Fax: 1-803-436-2652

## MEMORIAL PARK GAZEBO RESERVATION FORM

The City of Sumter welcomes you to **Memorial Park**. The gazebo is available for the public to enjoy. In reserving the gazebo, you must agree to the following conditions:

### GENERAL RULES:

- Leave the gazebo and its surrounding area as you find them.
- Amplified music is **NOT** allowed and electrical or battery operated equipment is allowed only with **prior approval**.
- The activities must take place during operating hours of the park: **7:00 am - dark**.
- Privacy is **NOT** guaranteed for weddings or parties.
- Tables or decoration of any kind must have prior approval.
- Chairs are allowed provided they are only placed on the concrete pad.
- All external structures must have prior approval.
- **NO ALCOHOLIC BEVERAGES ALLOWED.**
- A **two weeks** cancellation notice is required and a new date can be rescheduled within 60 days.
- **The person reserving the gazebo is accountable for observance of the above conditions and conduct of guests with consideration to the surrounding residential area.**

I \_\_\_\_\_ **HAVE READ AND AGREE TO THE ABOVE CONDITIONS FOR THE USE OF MEMORIAL PARK GAZEBO WITH THE UNDERSTANDING OF COMPLETE RESPONSIBILITY OF ADHERENCE TO THE RULES.**

Reservation Fee: **\$25.00**

**Cancellation Policy:** The reservation fee is refundable if a **30 day written notice** is received prior to the event. \_\_\_\_\_

*Initials*

\_\_\_\_\_  
**Event date and time**

\_\_\_\_\_  
**Name (print)**

\_\_\_\_\_  
**Event type**

\_\_\_\_\_  
**Number of Guests**

**Return Check Policy:** \$25 fee for \$100 or less, \$30 fee for over \$100. All subsequent payments must be cash or credit and will include the returned check fee.

**RENTAL APPLICATION**  
**(Memorial Park Gazebo)**

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**(ALL QUESTIONS MUST BE ANSWERED)**

**Today's Date:** \_\_\_\_\_ **Event Date Requested:** \_\_\_\_\_

**Name of Organization:** \_\_\_\_\_

**Organization Phone:** \_\_\_\_\_

**Name of Person Responsible for Use:** \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Day Phone:** \_\_\_\_\_ **Night Phone:** \_\_\_\_\_

**Name of Person Responsible for Payment (If same as above please write same):**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Type/Details of Event:**

\_\_\_\_\_  
\_\_\_\_\_

**Number of Attendees:** \_\_\_\_\_ **Event Coordinator:** \_\_\_\_\_

