

**SPORTS POOL, PICNIC PAVILION, PUTTING COURSE,
 and FIRE PIT RESERVATION APPLICATION**

Thank you for your interest in the use of our facilities for your event. This application will be viewed as a request and does not guarantee a facility reservation. In our efforts to meet your requirements, a recreation staff member will be in contact with you upon reviewing the application. Please allow 3 - 5 business days for processing. Incomplete forms may delay processing time.

RECREATION FACILITIES ARE RESERVABLE – MONDAY-SUNDAY – 7 AM TO DUSK (unless otherwise specified)

INDIVIDUAL REQUEST

Name: _____ Resident ID #: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____ Alternate Phone: _____

Email Address _____

Event Name / Description: _____

Estimated # Attendees: _____

Check ALL that apply: Residents Non-Residents (With Guest ID's) Non-Residents (Ineligible for Guest ID)

FACILITY TYPE REQUEST and LOCATION

SPORTS POOL: _____ **PICNIC PAVILION:** _____ **PUTTING COURSE:** _____ **FIRE PIT:** _____

Sports Pools: Rentals are on Sundays, 3 pm to Dusk Only at designated Sports pools. (See pool guidelines for more information)
Picnic Pavilions: Small Pavilions located at Neighborhood Recreation Areas are excluded. (See rules for use of picnic pavilions for more information)
Putting Courses: Only one 9-hole course may be reserved only on Sundays, 12 pm to Dusk, for a maximum of 3.5 hours; Minimum of 24 people, Maximum of 50.
Fire Pits: Maximum of 3 hours; Only one reservation will be allowed each day; Roasting/Cooking is prohibited. (See Fire Pit Guidelines for more information)

For complete Facility Guidelines go to DistrictGov.Org

Date: 1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Start Time (includes setup): _____ **End Time** (includes cleanup): _____

Potluck: _____ **Catered (Licensed & Insured):** _____

If catered, name of Florida Licensed and Insured Caterer: _____

Alcohol Consumption: BYOB (Individual Personal Consumption, No Sharing) Bartender (Certified Server Documentation & Liability Insurance Required) No Alcohol

HOW TO SUBMIT THE FACILITY RESERVATION APPLICATION
 Deliver in person to any Regional Recreation Center or Recreation Administration Office or
 Email to Room Reservations at RoomReservations@DistrictGov.org

USE FACILITY AT YOUR OWN RISK

The District reserves the right to cancel or alter facility / room use and will notify the applicant of any changes. Every effort will be made to accommodate the affected individual or organization.

Date Received: _____
 Received By: _____

APPLICANT SIGNATURE: _____ **DATE:** _____