

**TOWN OF CAMBRIA TOWN PARK  
APPLICATION FOR USE OF PARK SHELTER & AGREEMENT**

This application is being made with the understanding that the applicant has read, acknowledges and understands the Town of Cambria Town Park Rules and Regulations and will comply with the same.

**\*\*\*TOWN PARK HOURS ARE FROM DAWN TO DUSK\*\*\***

**SHELTERS 1, 3, 4, 5: Town Residents \$35.00 per day (Proof of residency required)/  
Non-Residents \$60.00 per day**

**SHELTER 2: Town Residents \$60.00 per day (Proof of residency required)/Non-  
Residents \$85.00 per day**

**GAZEEBO: Town Residents \$60.00 per day (Proof of residency required)/Non-  
Residents \$85.00 per day**

**ALL FEES ARE NON-REFUNDABLE: INDICATE SHELTER REQUESTED  
BELOW (Please print neatly)**

SHELTER #1 \_\_\_\_\_ SHELTER #3 \_\_\_\_\_ SHELTER #4 \_\_\_\_\_ SHELTER # 5 \_\_\_\_\_  
SHELTER #2 \_\_\_\_\_ GAZEEBO: \_\_\_\_\_

Handicap accessible picnic tables are available upon request. Please indicate if you will need one placed at your shelter for your event. \_\_\_\_\_

DATE OF EVENT \_\_\_\_\_ # OF PERSONS ATTENDING \_\_\_\_\_

ARRIVAL TIME: \_\_\_\_\_ DEPARTURE TIME: \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET TOWN/CITY ZIP CODE

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

The undersigned agrees to abide by the Town of Cambria Town Park Rules and Regulations. **I ALSO ACKNOWLEDGE THAT ALL FEES FOR RESERVATION OF A TOWN PARK SHELTER ARE NON-REFUNDABLE.**

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\***TO BE COMPLETED BY TOWN CLERK'S OFFICE**\*\*\*\*\*

Amount Paid \_\_\_\_\_ Date \_\_\_\_\_ Receipt #: \_\_\_\_\_

Received by \_\_\_\_\_ Date \_\_\_\_\_

Permit #: \_\_\_\_\_ Date mailed to Applicant: \_\_\_\_\_