

Office Use Only

Date Booked: _____

Memorial Station



Reservation Request Form

Drop off at the High Blue Wellness Center or email memorialstation@beltonparks.org

Contact Name: _____ Email: _____

Best Phone #: _____

Secondary Contact Name: _____ Relationship to Contact: _____

Best Phone #: _____

Organization/Group (if applicable): _____

Address: _____

City/State/Zip: _____

Event Description: _____ Estimated Attendance: _____

Day: _____ Start Time: _____

Date: _____ End Time: _____

Security Time (required with alcohol): _____

Extras: TV/Projector Patio Wedding Microphone
 Rentals Security Celebration Center

General Facility Policies and Procedures:

- A \$300 down payment is required at the time of reservation, which will be applied to your final payment.
- A \$250 damage deposit is due 21 days prior to your event. The deposit will be held until the end of your event and returned based on the results of the final facility walk through. Damage deposit must be made with a credit card or check only.
- You must have a completed Reservation Request Form and deposit to reserve a date.
- Final payment and complete paperwork are due 21 days prior to your event. Failure to do so may result in the cancellation of the reservation.
- If your event is canceled more than 24 weeks prior to your event, 90 percent of the fees you have paid will be refunded. If your event is canceled 23 or less weeks prior to the event, no fees paid will be refunded.
- The Park Department will not allow the use of the facility for individuals or groups who charge an admission for attendance or sell an item or product on the premises without the approval of the Belton Park Board.
- Facility reservation time must include set-up and clean-up time. An additional \$125 per 15 minutes will apply if the start and/or end times are exceeded.
- The Park Department reserves the right to reject any and all requests.

By signing below, you acknowledge that you have read, understand and agree to all terms and conditions. You also agree to pay all fees related to the facility rental.

We will be serving alcohol We will NOT be serving alcohol
 cash open

I understand that I must use a preferred alcohol vendor for Memorial Station.

Client Signature: _____ Date: _____

