

<b>OFFICE USE ONLY</b>
Application Approved
Application Disapproved
By: _____
Date _____



**Pavilion Reservation Form**  
 †(Be sure to take this form with you at the time of event)†

Name/Type of Activity \_\_\_\_\_

Sz of Group \_\_\_\_\_ Date of Event \_\_\_\_\_ Time (begin/end) \_\_\_\_\_  
 (October 15<sup>th</sup> last reservation)

Desired area:

Please check one:  
 (map on reverse  
 of page)

- 1 Maziarz Pavilion - 1 (South)
- 2 Cobblestone Pavilion - 2 (Near Restrooms)

Event Coordinator \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

E-Mail \_\_\_\_\_

Orleans County provides free use of the picnic pavilions to groups by reservation, and on a first come, first served basis. Picnic tables and electric service are provided.

If application is accepted, the group is responsible for adhering to all Park rules and regulations. The event coordinator will be held responsible for any damage to Park premises that may occur at this event. This Reservation takes precedence over other groups or individuals for the stated date and time above. For assistance, contact the Caretaker at the Marine Park Office, 682-3641.

**DO NOT staple, tack, nail or otherwise attach or fasten banners, balloons, signs, posters, tarps, lights, speakers or other devices to the pavilion.**

I will abide by the attached rules and regulations and acknowledge that failure to do so may result in removal from the Marine Park and denial of any future use of Marine Park recreational facilities.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

RETURN COMPLETED FORM TO:  
 Orleans County Marine Park  
 14016 Route 31  
 Albion, NY 14411  
 (585)589-3198 Fax 589-8105

# Orleans County Marine Park

