

CITY OF ORONOGO

653 E. CENTRAL ORONOGO MISSOURI 64855 417 673-4541 Voice 417 673-3246 Fax

Application for Park Pavilion Reservation

Fee \$ 10.00	Date	Pe	rmit #
Name:			
Address:			
Phone:			
Event Date :			
Event Hours :	AM /PM	I to	AM / PM
Cleanup during and a	fter the event:		
You will be responsible	e for picking up litter in the e	vent area, both d	uring and after event.
Signature of Applican	nt		 Date

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