



PARK EVENT BOOKING FORM

2019 Bookings Only

DATE

TYPE OF EVENT

WHAT AREA/S OF THE
PARK WILL YOU USE?

START TIME
(including setup)

END TIME
(including cleanup)

NUMBER OF GUESTS

CONTACT DETAILS

NAME

ADDRESS

ADDRESS 2

PHONE

E-mail

PAYMENT is by donation

CHEQUE to be made payable to Gwynne Vaughan Park Society
PO Box 530, Chilliwack, BC, V2P 7V5

I, the undersigned, hereby understand the information contained within this document to be correct and complete. I have read, understand, and agree to comply with the conditions set out in the document "Park Use Guidelines". I will be responsible for notifying the Gwynne Vaughan Park Society of any change in plans.

Signature Date

OFFICE USE ONLY

CONFIRMATION DATE

RECEIPT #