Town of Tappahannock
P.O. Box 266
Tappahannock, Virginia 22560
(804) 443-3336 or Fax 804-443-1051
www.tappahannock-va.gov

CENTRAL PARK PAVILION RESERVATION FORM

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

PLEASE CHECK PAVILION THAT YOU WISH TO RESERVE:

☐ Pavilion A ☐ Pavilion B

Date of Event: _____ Expected Attendance: _____ Time: _____ to _____

PARK HOURS ARE FROM DAWN TO DUSK

Describe your event (Birthday Party, Family Reunion, etc.):

_____

To reserve a pavilion an application must be submitted no earlier than hours prior to the reservation date.

I/We (applicant) agree to be fully responsible for the facilities rented per condition as outlined within the park rules attached. The Applicant understands that this request should be returned to the Town of Tappahannock for processing. The Applicant understands this request is subject to the approval of the Town Manager. Failure to comply shall result in costs incurred for damages while the park is being rented.

_____ _____

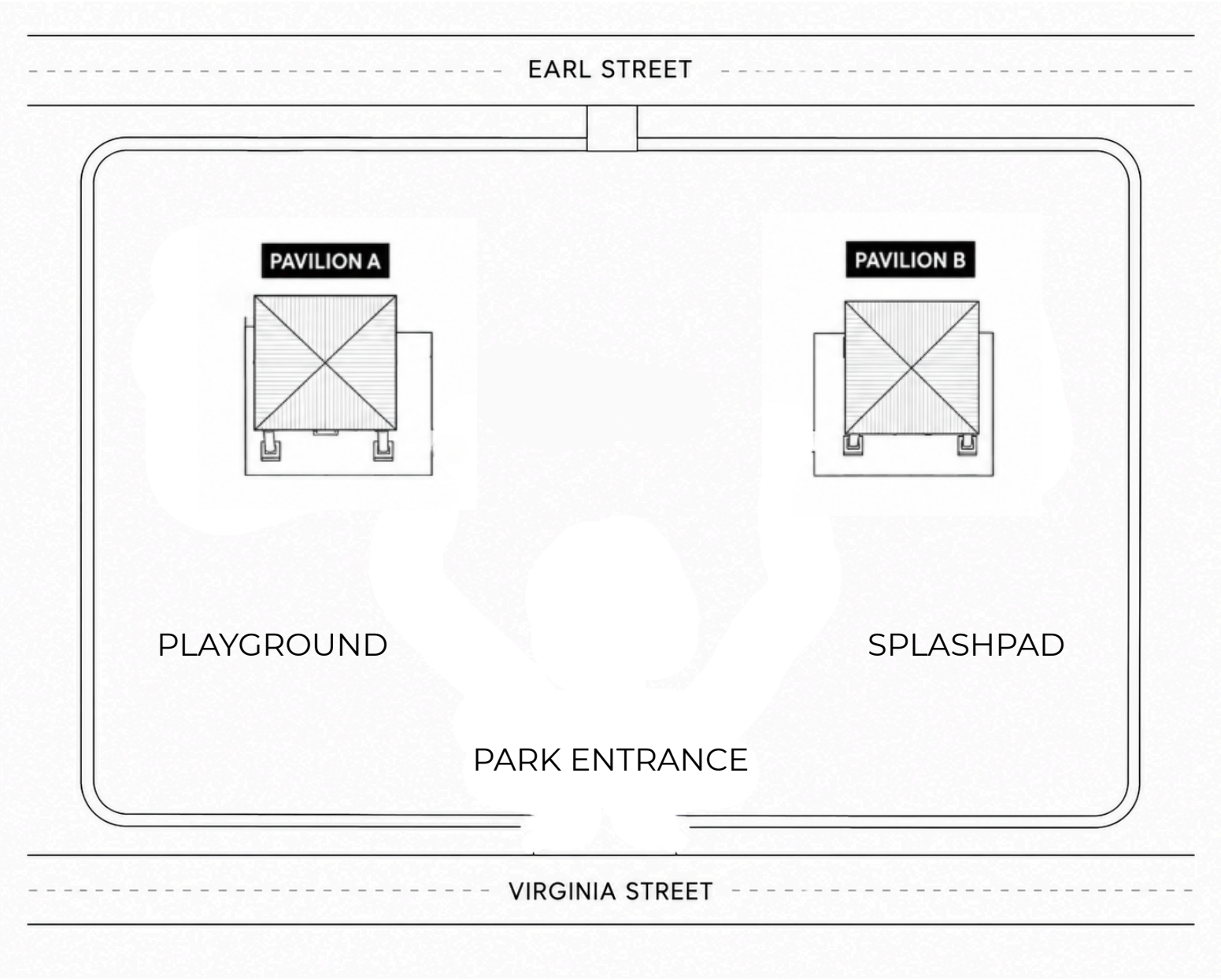
Signature of Applicant Date

FOR TOWN USE ONLY

___ Town Resident ___ Non-Resident

Approved by _____

PAVILION RESERVATION REFERENCE MAP



Each pavilion contains two picnic tables, with seating for up to 8 people per table. Total seating capacity for each pavilion is 16 people.

**PLEASE NOTE THAT RESERVATIONS ARE FOR ONE PAVILION ONLY.