# Borough of Avalon

640 California Avenue
Avalon, PA 15202-2499
Phone: 412-761-5820
Fax: 412-761-5953

**APPLICATION FOR SHELTER RENTALS**
**AVALON PARK 2012**

**Shelter to be Rented:**

Shelter #1 (with Kitchen) ○ $140.00 Resident ○ $165.00 Non-Resident
Proof of Residency Required

Shelter #2 (no Kitchen) ○ $100.00

Rental Date: _____ Shelter #1 Open at:_____ Total Due: $_____

Pool Admission yes/no #_____ Required x $4.00 = #_____

Name: _____

Organization: (if applicable) _____

Address: _____ Phone: _____

_____

Supervised Shelter Hours – 9:00 am to 10:00 pm
Additional charge of $10.00 per hour after 10:00 pm, paid at the Administration Office.
NO ALCOHOLIC BEVERAGES ARE PERMITTED IN THE PARK.
Rental fees must be paid in full 1 week after reservation.
Cancellations must be made 2 weeks or 10 business days before your event to receive a full refund.
After this period there is a $15.00 fee to cancel a reservation and receive your refund.

Applicant hereby agrees to abide by all rules and regulations governing use of Park facilities and acknowledges that violation may cause immediate revocation of permit and future issuance of permits.

This approved application must be shown when requested by proper authority.

Signature of applicant: _____ Date _____

APPROVED: _____
Borough Secretary

Payment Received: $_____ Cash Check # _____ Date: _____

$15.00 Deposit Refunds will be granted if shelter and restrooms were left in good condition.
Refund must be requested within 30 days of rental.

Refund Requested: $_____ Check # _____ Date: _____

CC: Applicant
Police
Office-original