HOCTAW	Caboose Park Reservation Form	
Event / Group Name:		
Full Name:		
City:	State:	Zip:
Daytime Phone #:	E-Mail:	
Date(s) Requested:	Start Time:	End:
	Park Pavilion is by this Agreement ONLY. Insferred, assigned, or sublet to another individual or of to dawn. The discharged within the Park.	organization.
All trash and debris must be pr Electricity is available.		There is no deposit required. Water is available.
park which may be caused by my group serves the right to cancel my reservation be made). Furthermore, I agree to not he	regulations of City of Choctaw. I further agree to par /organization use (other than normal wear and tear). at any time should a conflict arise with your use of the old the City of Choctaw or any of its employees resp group/organization use of the facilities at Caboose Par	It is also understood that the City re- he facilities (an appropriate refund will onsible for any and all accidents, inju-

Signature :	Date :	
Signature .	_ Dute .	

DO NOT WRITE BELOW THIS LINE - ADMINISTRATIVE USE ONLY						
□ Vendor Fee (V100): \$25.00/day X _	days	City Peddler/ Solicitor License #				
Amount received: \$	Received by:					
□ Cash □ Check#:	_ Credit Card:	Receipt#:				
POST-RENTAL INFORMATION						
Park Clean	or Date Reservation Cancelled:					
Amount to be Refunded:	Parks Director	:				
Check No:	Finance:					