

# Reservation Request

Hamilton Park Department  
260-488-3607

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date of Reservation: \_\_\_\_\_

Time: \_\_\_\_\_ to \_\_\_\_\_ Reservation for: \_\_\_\_\_

Fish Creek Trail: \_\_\_\_\_

Gnagy Park: \_\_\_\_\_

I have read and understand the rules for the use of the park facilities and hereby do agree to abide by these rules.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

By: \_\_\_\_\_

Date: \_\_\_\_\_