



PARK RESERVATION FORM

Lackawaxen Township
169 Urban Road Hawley, PA 18428
ph: 570-685-7288 fax: 570-685-2550

Date: _____

Applicant/Organization's Name: _____

Secondary Contact Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

Fax: _____ E-mail: _____

Name of Park _____

Type of Rental (check one): () Private/Commercial () Non- Profit () Government/Education

Function or Event:

Month: _____ Day(s): _____ Year: _____

Time of Arrival: _____ AM/PM Time of Departure: _____ AM/PM

Anticipated Attendance (REQUIRED): _____

Event Time: _____

~ PICK UP KEYS 24 HOURS PRIOR TO YOUR EVENT ~

Reservation dates are not held without a \$20.00 Key Deposit. The Township reserves the right to withhold payment of deposit for lost keys or damage to the facility site and/or its property.

KEY DEPOSIT \$ _____ KEY RETURNED: _____