

Shelter/Park Reservation Request

Name of Group _____ Date _____

Date(s) Requested _____

Circle Facilities Needed: Shelter #1 Shelter #2 Shelter #3 Grounds and Playing Fields

Name of Contact Person _____

Address _____ Phone # _____

Complete the above form and return with a check for \$15.00 made out to the Town of Concord and return or mail to:

Supervisor's Office, Town of Concord, Box #368, 86 Franklin St., Springville, NY 14141

PLEASE NOTE: Reservations for Community Park Facilities will be honored on a first requested basis.