

# Murphree/Washington/Academy Request Form

Person in charge of event: \_\_\_\_\_ Over 21 Y: \_\_\_ N: \_\_\_  
(Must be age 21 and above)

Today's Date: \_\_\_\_\_

Date of Event: \_\_\_\_\_ Begin time: \_\_\_\_\_ End time: \_\_\_\_\_

Daytime phone number: \_\_\_\_\_ Nighttime number: \_\_\_\_\_

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

**E-Mail Address:** \_\_\_\_\_

**MURPHREE PARK** \_\_\_\_\_ **WASHINGTON PARK** \_\_\_\_\_ **ACADEMY PARK** \_\_\_\_\_

Birthday Party: \_\_\_\_\_ Reunion: \_\_\_\_\_ Other: \_\_\_\_\_

Description of Event \_\_\_\_\_

\_\_\_\_\_

**YOU MUST BE AGE 21 OR ABOVE TO COMPLETE AND SIGN THIS FORM.**

**Rental Fees: 1 Hour: \$20 2 Hour: \$25 3 Hour: \$35 4 Hour: \$45 4+ = \$80**

Paid: \_\_\_\_\_

TPRD Received: \_\_\_\_\_

\_\_\_\_\_  
HOST OF PARTY DATE

\_\_\_\_\_  
TPRD Programs Coordinator DATE

\_\_\_\_\_  
TPRD Director DATE

PLEASE KEEP A COPY OF THIS FORM OR YOUR RECEIPT WITH YOU AT ALL TIMES THE DAY OF THE EVENT. SHOULD ANOTHER GROUP BE PRESENT WHEN YOU ARRIVE AND CLAIM TO ALSO HAVE THE PAVILION RENTED, PLEASE CALL 334-566-4031.

THE CITY OF TROY POLICE DEPARTMENT WILL BE CALLED TO RESOLVE ANY DISPUTES INVOLVING CLAIMS OF DOUBLE-BOOKINGS, AND THE GUEST WITH THE RECEIPT WILL BE RECOGNIZED AS THE CORRECT PARTY.