

CITY OF GULF BREEZE

PARK PERMIT APPLICATION PARKS & RECREATION DEPARTMENT

Name of Person and/or Organization, Requesting Use of Facility and Responsible for Conduct:

Name: _____

Organization: _____

Address/Telephone Number of Person/Organization:

Address: _____

Telephone Number: _____

Date of Event: _____ Time of Use: _____ Estimated Attendance: _____

* GAZEBO _____ Fee: \$40.00

If your event is scheduled for Saturday or Sunday the key for the grill must be picked up before 4:00 P.M. on Friday

**NOTE: IF CANCELLATION FOR GAZEBO RESERVATION IS MADE
14 DAYS BEFORE SCHEDULED USE, A \$10.00 CHARGE WILL BE LEVIED
ALONG WITH A \$5.00 PROCESSING CHARGE, AMOUNTING TO \$15.00.
(NO Refund If Cancellation Made Within 7 Days of Usage.)**

APPROVED: _____

DISAPPROVED: _____

(850) 934-5100 - FAX (850) 934-5114
P.O. Box 640 - 1070 Shoreline Drive, Gulf Breeze, Florida 32562-0640