

Date of Application_____

BOROUGH OF JEFFERSON HILLS 925 Old Clairton Road Jefferson Hills PA 15025

APPLICATION FOR BEEDLE PARK SHELTER

Day & Date Requested_					
Name of Applicant			Phone No		
Address					
Resident Yes					
Email Address					
Estimated No. in Attend	ance				
Will Alcoholic beverage	s be served?		(Glass bottles are NOT PERMITTED)		
Fime arriving for set-up		1	Time Departing premises		
-	ards not accepted		vable to Borough of Jefferson Hills and must accompany oplication and rental fee received thereafter are subject to		
Shelter	Deposit	\$100.00	\$50.00 Refund		
	U	1	Rules and Regulations outlined in Code Chapter 16, as by affix my signature that I will abide by same.		
			Applicant's Signature		
Borough Use Only					
Date Application Receiv	ed by Borough_				

Amount Paid_____ Check #, MO # or Cash___

Borough Manager