



City of Calvert City Pavilion Reservation Request Form

Pavilion 1 (BEHIND CIVIC CENTER)

Pavilion 3 (OLD PARK STONE)

Pavilion 2 (DOCTORS PARK NEAR BASEBALL FIELD)

Pavilion 4 (OLD PARK PLAYGROUND)

NAME: _____

ADDRESS: _____ CALVERT CITY, KY 42029

RESERVATION DATE: _____

RESERVATION TIME: _____

PHONE NUMBER: _____

Comments: _____

Signature _____ Date _____

Supervisor's Signature _____ Date _____

APPROVED

DECLINED REASON: _____