

City of Charlotte
Bennett Park Pavilion Reservation Application

(Please print or type)

Name (Applicant): _____ Date: _____

Address: _____ City: _____

State: _____ Zip: _____ Amount: _____

Date Desired: _____ / _____ / _____
Month / Date / Year

Time desired: _____

Number in Party: _____

Describe type of occasion/event: _____

Notes to DPW: _____

Applicant Signature: _____ Phone #: () _____

To Be Completed by City

Reservation Confirmed: Date: _____ By: _____

Reservation Declined: Reason: _____

Condition of site after event: Excellent Good Poor

Cc: Applicant
Department of Public Works
Posted at site one working day prior to event

