

REQUEST FOR USE OF WHITE OAK HERITAGE HILL PARK PAVILION



Name / Address	s of individual or group:		
		Contact person	phone number:
Reason for use	(party, baby shower, etc.)		
Use of pavilion i	requested for Date :		
Resident:	\$25.00 Rental fee	Proof of resider	ncy required.
Non-Resident:	\$50.00 Rental fee	Residency verif	ied by:
	box key. ash must be removed from the pa No alcoholic beverages are perm	-	=
You and you	COVID-19 pandemic these ad or guests must follow all guid Health, and Allegheny Coun of your rent	delines issued b ity Health Depar	y the CDC, PA
Rental fee of \$2	5.00 or \$50.00 and Security d	eposit of \$50.00 i	received by:
Date:	Cash:	Check #:_	
Facility inspected by			Date
Security deposit returned to			Date
Key # fo	r electrical box received by		Date
Key # for	electrical box returned to		Date