

VILLAGE OF VALLEY VIEW  
RECREATION DEPARTMENT  
6828 Hathaway Road  
Valley View, Ohio 44125  
(216) 524-9365

PAVILION RESERVATION CONFIRMATION

Please complete each item below and return this form to the Front Desk of the Community Center. All information must be completed prior to receiving a permit for your pavilion. Your signature below indicates that you have read and understand all park and pavilion policies and guidelines.

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

**Park and Pavilion Policies and Guidelines**

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| 1. No permit will be issued until after the Pavilion Reservation Form has been filled out and signed.  | 4. Only 1 reservation per household is permitted until April 1. After this date, only 1 reservation per resident over the age of 18 is permitted   |
| 2. There is a \$100 deposit required for each pavilion reservation. <b>This deposit will be forfeited for the following reasons:</b><br>a. The pavilion or area used is left damaged or unclean. The resident may also be financially responsible for additional damage.<br>b. The pavilion is unused and not cancelled within 7 days prior to the reservation date.<br>c. The Recreation Board has the right to rule on any situation not covered here. | 5. Residents must post a copy of their permit in the box provided at each pavilion on the day of their reservation.  |
| 3. Pavilions may only be reserved by residents of The Village of Valley View.  | 6. The resident must remain at the park until the reservation is completed.  |
|  | 7. Residents must clean up the pavilion, picnic tables, etc. upon completion of their reservation.   |
|  | 8. No Alcohol is permitted   |
|  | 9. Out of respect for fellow residents, do not place signs for your event in residents' yards or on utility fixtures in residents' yards. <b>PLEASE KEEP ALL SIGNS ON PARK PROPERTY.</b> |

My signature below indicates that I have read and understand all policies and guidelines concerning the reservation of a pavilion in the Village of Valley View. I also understand that abusing the privilege of reserving a pavilion may result in the loss of your deposit and/or future privileges.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**(FOR OFFICE USE ONLY)**

Pavilion Reserved \_\_\_\_\_ Date Reserved \_\_\_\_\_

Time of Reservation: 10:00 AM to 10:00 PM (unless otherwise noted \_\_\_\_\_)

Deposit \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Date \_\_\_\_\_ Staff Initial \_\_\_\_\_

Permit No. \_\_\_\_\_

Date Permit Mailed/Picked Up \_\_\_\_\_