



CITY OF PARKVILLE • 8880 Clark Avenue • Parkville, MO 64152 • (816) 741-7676 • FAX (816) 741-0013

Shelter Reservation Permit – English Landing Park

8701 McAfee, Parkville, MO 64152

Reservations are available each year from March 1 through October 31

*Required fields

Applicant Name: _____ Group Name/Function: _____

Day of Week: SU M T W TH F SA Date Requested: _____ Group Size: _____
75 OR LESS PER SHELTER

(Weddings, events, amplified sound and stage/patio reservations are considered special events and require additional review. Please visit <http://parkvillemo.gov/guidelines-events-parkville/> for more information.)

FEES (PER SHELTER, PER TIME SLOT)

Non-Peak Days: Resident: \$25 Non-Resident: \$35 Self-Contained BBQ: \$30

Peak Days: Resident: \$50 Non-Resident: \$60 (Holiday & Parkville event weekends Memorial Day thru Labor Day)

*Residency is verified through the Platte County Collector's Office at the time of reservation. If your real estate tax payment does not show taxes paid to Parkville, the property is not located within city limits and you must pay the non-resident fee.

Reservation Period*	Shelter Reserved*			Water	Electricity	Fee
<input type="checkbox"/> 7:30 AM to 10:30 AM	EAST	WEST	RIVER	No	No	\$_____
<input type="checkbox"/> 11 AM to 2 PM	EAST	WEST	RIVER	No	No	\$_____
<input type="checkbox"/> 2:30 PM to 5:30 PM	EAST	WEST	RIVER	No	No	\$_____
<input type="checkbox"/> 6 PM to 9 PM	EAST	WEST	RIVER	No	No	\$_____
<input type="checkbox"/> Self-Contained BBQ cooker (East and West shelters only)				Yes	No	\$_____

River Shelter: No BBQ Grills allowed and no vehicle access

Water & Electricity turned on unless noted not needed.

CONTACT INFORMATION:

*Contact Person: _____ *Signature: _____

*Address/City/State/Zip: _____

*Daytime Phone: _____ E-mail: _____

AFFIDAVIT OF LIQUOR CONSUMPTION IN PARK:

This portion is required only if you plan to consume liquor in the park.

The undersigned requests permission for the above group to consumer liquor in English Landing Park on the day and between the hours shown. (If the undersigned is not the contact person named above, please print name, address and phone number on the back of this sheet.) _____

TERMS & CONDITIONS:

TO PARK PATRONS: This is your permit to use the facility/facilities that you have reserved. **Keep this permit with you and present it on demand.** If someone is occupying the space you reserved, you should present this permit and request they vacate the area. If they refuse to leave the reserved area, contact the Parkville Police at 816-741-4454 or 816-858-3521 to have an officer dispatched. This is the only situation where a refund will be considered. If you do not follow these instructions, you cannot request a refund of payment. **NO REFUNDS** will be issued if you change your mind, inclement weather, flooding, other acts of nature, or any other reason. **NO PARKING** around shelters or on the BBQ Pad Sites. **NO PARKING** on the grass. Law Strictly Enforced – \$75.00 MINIMUM FINE. Public parking areas are provided before the entrance to English Landing Park.

FOR CITY USE ONLY:

Amount Paid: \$_____ Cash _____ Check # _____ Credit Card _____ Date: _____ Received by: _____

1. File Original
2. Copy to Requestor
3. Copy for Parks
4. Copy for Police
5. Copy with Receipt