

**CITY OF SHAWNEE
SHELTER HOUSE REQUEST**

NAME _____ PHONE (C) _____ (H) _____

ADDRESS _____ CITY _____ ZIP _____

E-MAIL _____

GROUP/ORGANIZATION _____

PURPOSE OF RESERVATION _____

GUEST COUNT _____

RESERVATION REQUEST

DATE

8 a.m. – 2 p.m.

3 p.m. – 9 p.m.

8 a.m. – 9 p.m. (Full Day)

	Seating Capacity	Shelter Size	Resident Fees		Non Resident Fee	
			Half Day	Full Day	Half Day	Full Day
Erfurt Pavilion	64	Large	\$60	\$120	\$120	\$240
Erfurt Pavilion Fireplace Permit			\$5		\$10	
Erfurt Play Shelter	32	Medium	\$30	\$60	\$60	\$120
Garrett Pavilion	48	Large	\$60	\$120	\$120	\$240
Garrett Family Shelter	30	Medium	\$30	\$60	\$60	\$120
Gum Springs Shelter 1	32	Medium	\$30	\$60	\$60	\$120
Gum Springs Shelter 2	32	Medium	\$30	\$60	\$60	\$120
Herman Laird	32	Medium	\$30	\$60	\$60	\$120
Listowel Shelter 1	32	Medium	\$30	\$60	\$60	\$120
Listowel Shelter 2 (Gazebo)	24	Medium	\$30	\$60	\$60	\$120
Monticello Springs Shelter 1	32	Medium	\$30	\$60	\$60	\$120
Monticello Springs Shelter 2	24	Medium	\$30	\$60	\$60	\$120
Pflumm/Bichelmeyer Shelter 1	24	Medium	\$30	\$60	\$60	\$120
Pflumm/Bichelmeyer Shelter 2	8	Small	\$10	\$20	\$20	\$40
Quivira Glenn	32	Medium	\$30	\$60	\$60	\$120
Sister Cities	48	Medium	\$30	\$60	\$60	\$120
Swarner Park Shelter 1 (South)	48	Medium	\$30	\$60	\$60	\$120
Water Tower	16	Small	\$10	\$20	\$20	\$40
West Flanders Shelter 1	32	Medium	\$30	\$60	\$60	\$120
West Flanders Shelter 2	48	Medium	\$30	\$60	\$60	\$120
Wilder Bluff Pavilion	64	Large	\$60	\$120	\$120	\$240
Wilder Bluff Pavilion Fireplace Permit			\$5		\$10	

The undersigned agrees that this permit is issued with the express understanding that it can be suspended or revoked by the City if the permittee engages in misconduct or fails to clean and police the area adjacent to the shelter or park area that they are reserving. Failure to leave the area clean will result in discontinuation of the use of the facility. The City of Shawnee does not discriminate against any person on the basis of race, color, national origin, age or handicap in the operation of any programs, activity or facility.

SIGNATURE OF APPLICANT

DATE

