

# HART COUNTY BOTANICAL GARDEN PAVILION USE APPLICATION

Your Name: \_\_\_\_\_

Name of Organization (if applicable): \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_

Your email address: \_\_\_\_\_

Your Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Reservation Date: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Reservation Hours: Begin time: \_\_\_\_\_ (AM / PM) End time \_\_\_\_\_ (AM / PM)

**FEES: A Rental Fee of \$125 is required for every reservation. A Security Deposit of \$100 is also required for every reservation. If alcohol is being served the security deposit is \$250. The security deposit will be refunded after a damage inspection is completed. Thirteen tables and fifty-six chairs are available for a rental fee of \$50 (\$25 for members and nonprofit groups) and is nonrefundable.**

**Fees: All checks made payable to: Hart County Botanical Garden.**

**Mail Checks to: P. O. Box 44, Hartwell, Ga 30643**

Fee	Date Paid	Pay Source (Cash/Check/Online)
Pavilion Use Fee – \$125		
Security Deposit – \$100		
Security Deposit – \$250		
Table & Chair Rental – \$50		
Current Members - Table & Chair Rental – \$25		

**Total Paid:** \_\_\_\_\_

**I have read and agree to abide by the Hart County Botanical Garden Pavilion Use Policy. I understand that I am renting and using the pavilion at my own risk.**

**Signed:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

For Botanical Garden Use Only: Reservation Put on Calendar: _____, Email sent to Reserver and to Garden Contact: _____ Amount of Deposit Refunded: _____ Date: _____ Check # _____ Signed: _____ Date: _____
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