

**CRICHTON MCCORMICK PARK
P.O. BOX 293
PORTAGE, PA.
(814) 736-3390**

SHELTER RENTAL APPLICATION

ORGANIZATION NAME: _____

OR

INDIVIDUAL'S NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

PLEASE RESERVE SHELTER(S) # _____ FOR:

_____, _____, _____
(MONTH) (DAY) (YEAR)

NUMBER OF INDIVIDUALS INTERESTED IN SWIMMING: _____

I have read the attached information sheet and fully understand the Borough of Portage's ordinances, as well as the Portage Area Joint Parks and Recreation Commission's regulations.

I am enclosing the rental fee and deposit. I understand that, if the shelter is cleaned satisfactorily after use, I will have my deposit returned to me.

Once payment is received, an email will be sent approving your application.

Signature

Date

Send application and rental fee to:

**Sharon Squillario
PAJPRC
P.O Box 293
Portage, PA 15946**