

# HOLTON TOWNSHIP PARK PAVILION RESERVATION

Name of person or group requesting reservation:

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Phone Number: \_\_\_\_\_

Date of activity: \_\_\_\_\_

Time of activity: \_\_\_\_\_

Person supervising activity: \_\_\_\_\_

I agree to pay Holton Township for any damages to the park due to the usage of our activity.

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Name

DATE

Form can be emailed to [holtosecretary@holtontownship.com](mailto:holtosecretary@holtontownship.com) or mailed to:

Holton Township  
P.O. Box 328  
Holton, MI 49425