



**Oxford Township Parks & Recreation**  
**2795 Seymour Lake Rd.**  
**Oxford, MI 48371**

**Office- M-F 9am-5pm (248) 628-1720 & Nights & Weekends- (248) 969-2032**

<i>Office Use Only</i>	
Taken by: _____	Date: _____
Date of Reservation: _____	
Rental Fee Paid: _____	

## SEYMOUR LAKE PARK PAVILION APPLICATION & PERMIT

Name of group/party: \_\_\_\_\_

Resident/Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of function: \_\_\_\_\_ Event Start Time: \_\_\_\_\_ Event End Time: \_\_\_\_\_

Pavilion Requested: \_\_\_\_\_ Number of users: \_\_\_\_\_

<b>PAVILION</b>	<b>RES</b>	<b>NON RES</b>	<b>CAPACITY</b>
Smith Silo Shelter	\$100	\$125	60
Hanson Pavilion	\$100	\$125	50
Prince Complex Pavilion	\$50	\$75	30
Laidler Pavilion	\$100	\$125	120


### ALCOHOL PROHIBITED IN ALL OXFORD TOWNSHIP PARKS

The undersigned further understands that failure to comply with all agreements herein stated or falsification of any information called for in this application will be grounds for denial of this or any future permits.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be completed by Park Supervisor: Indicate condition of park: Clean ___ yes ___ no	
Damage ___ yes ___ no	Remarks: _____
Signed: _____ Date: _____	

- Office Copy (original)**     
  **Park Supervisor (copy)**     
  **Applicant (copy)**

 **The Oxford Parks and Recreation Commission will provide the necessary reasonable auxiliary aids and services for individuals with disabilities. Please contact the Parks and Recreation Office at (248)628-1720 as soon as possible to allow Parks and Recreation sufficient time to have the reasonable aids and services available.**