PARK RESERVATION REQUEST

OUTDOOR RECREATION
56SVS/SVRO
LUKE AFB, AZ 85309-1722
https://www.lukerecreation.com

Rentals: 623-856-6267 Tours/Aquatics: 623-856-9334 Fax: 623-856-4174

1. Request the below listed base park/picnic area be reserved (check one), by the listed contact.

☐ Fowler Park Medium Ramada ☐ Fowler Park Large Ramada ☐ Silverwings Park

Name/Rank of Contact: _____ .

Org/Unit: _____ Phone #: _____ .

Date Needed: _____ .Time: _____ to _____ .

Type of activity being conducted: _____ .

Will alcohol beverages be consumed? Yes / No

2. Alcohol beverages must not be sold. Only malt beverages (beer) may be consumed.
3. The above listed contact understands that this request is only for the ramada and restroom facility and does not reserve the entire park.
4. It is also understood that if the area is not going to be used, the reservation must be canceled within 12 hours. Failure to do so may result in denial of future use of the facility by the contact.
5. The contacts organization/unit is responsible for ensuring compliance with AFI 34-119 and LAFB supplement to include: designated drivers, the prudent consumption of alcoholic beverages, and conduct of personnel during the activities/functions in the park/picnic area.
6. The contact must ensure the following rules are observed:
   - At the completion of the activity, remove all trash from the ramada and the restroom facility. Police any blowing trash in the area.
   - At the completion of the activity, all barbecue coals will be completely extinguished and ashes removed from the area.
   - Trees and shrubbery in the area will be protected and not damaged by any individuals of the contacts organization.
   - Pets taken into the area will be kept on a leash and cleaned up after at all times.
   - Vehicles will not be driven into the area or driven on the grass.
   - NO GLASS containers of any kind are allowed in the park/picnic area.
7. Resale and fund-raising activities are not authorized unless pre-approved in writing by 56 SVS/CC.
8. This reservation is subject to change or cancellation due to unforeseen circumstances.

I understand the above requirements and accept full responsibility for utilization of the facility and area.

_____ . _____ . _____

Signature of Contact Date Approved By Date