



DeKalb County

Park and Recreation Department

PLAY KIT RESERVATION

Please Print

Date Picking Up Kit: _____

Date Kit Due Back: _____

Kit must be picked up before 4:00p.m. unless otherwise noted, equipment must be returned by 12 noon on the next business day.

Name: _____ Organization _____

Address/City/state/Zip Code: _____

Day Phone: _____ Evening Phone: _____

# Items	Kit Contains the following items:	Condition
	Horseshoe Set: Horseshoes & 2 Pegs	
	Basketball or Football or Kickball	
	Wiffleball set:(Bat and Ball & 4 bases)	
	Frisbee	
	Football	
	Tug of War Rope	

PAYMENT INFORMATION: \$25.00 must be paid along with the application. Please make check payable to "DeKalb County."

Name: _____

Address/City/State/Zip Code: _____

Day Phone: _____ Night Phone: _____ Emergency Phone _____

Amount Paid: _____ Circle One: Cash Check Money Order

I _____ agree to be responsible for the return of the play kit. I understand I will be charged for any missing or damaged items.

Signature: _____ Date _____

Please note: Equipment may be subject to change due to availability and condition of stock on hand.