Town of Port Royal
Park/Sands Reservation Application
P.O. Drawer 9
Port Royal, SC 29935
843 986-2211

Date of Application: ____/____/_____

Date of Event: ____/____/_____

Time of Event: ____/____/_____

Name or Description of Event: _____

Venue(s) Check all that apply

[ ]	Live Oaks Park	[ ]	11th Street Church	[ ]	The Sands
[ ]	Naval Heritage Park	[ ]	Casablanca Park	[ ]	The Boardwalk
[ ]	Other				

Name and Address of Sponsor: _____

_____

Phone Number and E-mail _____

Deposit Paid By/Refunded To: _____

IS THE EVENT OPEN TO THE PUBLIC?	**Y**	**N**
WILL ADMISSION BE CHARGED OR DONATIONS ACCEPTED?	**Y**	**N**
WILL ALCOHOLIC BEVERAGES BE SERVED?	**Y**	**N**
(If yes, check, with South Carolina ABC for Permit Requirements)		
DO YOU EXPECT OVER 100 PEOPLE TO ATTEND?	**Y**	**N**
(If yes, Security must be provided)		
WILL FOOD AND BEVERAGES BE SOLD?	**Y**	**N**
(If yes, Check with Health Department for Permit Requirements)		

Deposits and Fees:	**Park/Sands Deposit:**	**$50.00**		
	Park/Sands Deposit:	**$50.00**	**(Non-residents)**	**$ 15.00**
	Fencing	**$50.00**		

Security Fees: **Security Officer's overtime rate plus Administrative cost**

Total Deposit **$**_____

Contact: **Capt. Beach for 100 plus and or Alcohol License.**

_____

Signature of Lessee **Date**