

254 Railroad Street | PO Box 162 Wilson Creek, Washington 98860 Phone: 509.345.2531 Fax: 844.473.1909

CITY PARK KITCHEN FACILITIES USE APPLICATION

First & Last Name:	
Mailing Address, City, State & ZIP:	
Physical Address: (if different)	
Date(s) Requested:	
Type of Event:	
Phone Number(s):	
Email Address:	
Applications must be submitted at least five (5) business de agree that submission of this application does not guarante City Park. Use is available on a first come, first served basis \$25 fee will be required prior to use. Payment is accepted check. The clerk/treasurer will notify you of availability with sopen Mondays, Wednesdays, and Thursdays from 12:00 or via the payment drop box at Town Hall, via mail to PO E	ee use of the kitchen facilities at the Wilson Creek If your application is approved, a non-refundable I at Town Hall in the form of cash (preferred) or hin three (3) business days. Please note Town Hall -3:00 pm. Applications may be submitted in person
	OFFICIAL USE ONLY
Applicant Signature	Application Received On/By (Date/Name)
Printed Name	Payment Received On/By (Date/Initial)
Date	Approved Denied