

# ST. CHARLES COUNTY PARKS DEPARTMENT

## APPLICATION FOR SPECIAL AUTHORIZATION

**PLEASE PRINT: (APPLICANT MUST BE 18 YEARS OF AGE TO RENT ANY ST. CHARLES COUNTY FACILITY)**

Today's Date \_\_\_\_\_

Event Beginning Date & Time \_\_\_\_\_ Event ending Date & Time \_\_\_\_\_

Type of Event \_\_\_\_\_

Estimated Attendance *Staff* \_\_\_\_\_ *Volunteers* \_\_\_\_\_ *Spectators/Participants* \_\_\_\_\_

Applicant Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Main Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Name of Organization Applicant Represents \_\_\_\_\_

Contact Person (Day of Event) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Main Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

Email \_\_\_\_\_

**Please answer the following question regarding your event:**

1. Please list the Park/section of park or what facility(s) you wish to reserve
2. Will your proposed event require any type of special equipment/apparatus to be brought into the parks?  
\_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please list equipment/apparatus type

3. Name of company and telephone number who will supply this equipment/apparatus:

**TO CONTACT THE PARK RANGER ON DUTY CALL 314-713-4394. IN AN EMERGENCY CALL 911.**

