

APGMWR

Picnic Area Reservation Form
Main Office: Outdoor Recreation Service Center
BLDG 2184 Swan Creek Drive, APG, MD 21005
(410)278-4124

<http://www.apgmwr.com/recreation-and-sports/picnic-areas>

Date Requested: _____

Last Name: _____ First Name: _____

Please check your eligibility status:

- Active Duty Retired Military Contractor Full time on post
 DOD Civilian Emp. Retired Civilian 100% Disabled Vet
 Family Member of Eligible Patron (If so check eligibility status as well)

of Patrons Eligible: _____ # of Patrons Non- Eligible: _____

Phone Number: _____ Email: _____

Preferred Method of contact (please check one): Phone Email

Organization (if applicable): _____

Location Requested

Shore Park (Aberdeen Area)

Please check one or more if the following locations below:

- Whole Park (3 pavilions-300 people)-\$340.00
 Pavilion A- (closest to the restrooms-100 people)-\$100
 Pavilion B-(middle-100 people)-\$100
 Pavilion C-(closest to the playground-100 people)-\$100

Woodpecker Point (Aberdeen Area)

- \$50 (50 people)

Skippers Point (Edgewood Area)

- \$50 (50 people)

Reservation Policies:

1. All fees must be paid in full at the time of reservation
2. Cancellations must be made fourteen business days prior to the date requested in order to receive a full refund. The refund must be returned in the same method of payment as received, credit card refund will be credited to your card immediately, cash and check payments will take up to 6 weeks to receive a refund.
3. You must notify ODR of cancellation in writing on or before the cancellation date.
4. Shore Park restroom keys and the picnic game bag must be signed for a day prior to the picnic at bldg. 2184- Outdoor Recreation Service Center. Keys and picnic game bag are issued Monday thru Friday between 9am- 5pm.

I understand I must be eligible MWR patron as described in IAW-AR-215-1. I have read the APGMWR Reservation policies and Picnic Rules and agree to abide by them; failure to follow the rules may result in immediate removal from the picnic area.

POC Signature: _____ Date: _____

MWR Staff Acknowledgement: _____ Date: _____

Staff Only- Cancellation Date: _____