

# PAMLICO COUNTY PARKS & RECREATION DEPARTMENT

Garry W. Cooper  
Director

Post Office Box 488  
Bayboro, North Carolina 28515  
www.pamlicocounty.org

Tel: (252) 745-4240  
Fax: (252) 745-2301

Call for AVAILABILITY, prior to sending in Reservation Form.

**Please Check Below Facility You Are Requesting:**

	Park Name and Location
<input type="radio"/>	Alliance Recreation Park (Shelter #1 attached to restrooms) – 256 Ireland Rd., Bayboro
<input type="radio"/>	Alliance Recreation Park (Shelter #2) – 256 Ireland Rd., Bayboro
<b>The Playground at the Alliance Recreation Park Can Not be Reserved</b>	
<input type="radio"/>	Dawson’s Creek Beach Access – 3886 Janiero Rd., Arapahoe
<input type="radio"/>	Newton Creek Park – 229 Matthew Rd., Bayboro (Maribel Community)
<input type="radio"/>	Oriental Recreation Park – 6417 Straight Rd., Oriental
<input type="radio"/>	Raccoon Creek Park – 1206 NC 304, Bayboro
<input type="radio"/>	Styron Beach Access – 681 Styrontown Beach Rd., Oriental

Date Requested: \_\_\_\_\_ Time of Reservation: \_\_\_\_\_

Purpose of Use: \_\_\_\_\_ Number of People: \_\_\_\_\_

Name of Group/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

(Person Responsible For Group) Email: \_\_\_\_\_

**I hereby release and hold harmless the County of Pamlico, the Pamlico County Parks & Recreation Department, and any of their agents or representatives from and against any and all claims and liability and causes of action at law for loss, damage, or injury (including death) to persons and/or property which would or could be based on the qualification of the instructor/coach or the adequacy of the supervisor, facilities, or equipment used in the program named above.**

**All Rules and Regulations of the Pamlico County Parks & Recreation will be adhered to. I have read and understand the Parks and Recreation Department’s Ordinance covering rules and regulations. The Pamlico County Parks & Recreation Department has the right to cancel any event due to inclement weather or other justifiable reasons.**

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

**OFFICE USE ONLY**

( ) APPROVED	( ) DENIED
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DIRECTOR’S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FEE AMOUNT (If Applicable): \$\_\_\_\_\_