

TOWN OF WELLS
Wells Lakeside Park and Pavilion
PO Box 585
Wells, VT 05774
Ph: (802)645-0486; Fax: (802)-645-0464

USE APPLICATION

Name:	Date Requested:
Street Address:	Number of Guests:
City: ST: Zip:	Phone: Email:
Type of function:	Arrival: Departure:
Insurance:	
Deposit received: By: Cash: Check#	

Reservation date is tentative until confirmed by Selectboard
 Conditions of Reservations: Please see attached Rules of Use

Applicant signature: _____ Date _____

Selectboard Approval: _____ Date _____