

Holly Spring Park Rules

Signature Page

I am an individual/authorized representative of a group. I have reviewed the Holly Spring Park Rules. I understand that it is my responsibility to be sure the members (or the individual) of the group I represent are aware of and abide by these conditions.

Printed Name of responsible person _____

Signature of responsible person _____

Date _____ Contact telephone number _____

Group Name _____

Type of activity _____

Requested date of activity _____

Confirmed by Holly Spring Representative _____

Date _____