



Event Confirmation

Date: _____

Time: _____ Hours: _____

Event description: _____

Private/Corporate/Non Profit event: *(circle one)*

Rental needs: *(circle all that apply)*

Carousel / Dance Hall / Corporate Pavilion I / Barbeque Pit

Additional rides on carousel _____ *{This is for a private ride/just your party}*

Waiver discussed/signed *(circle when accomplished)*

Contact Person: _____

Contact Person's phone # _____ Cell# _____

Contact Person's address: _____

Price Quote: _____

Deposit: \$100 due/paid *(circle one)* Check/Money Order *(circle one)*

Return this form along with your payment.

Money orders or checks p/t EPCPS, P.O. Box 3056, Elmira, N.Y. 14905. \$100 deposit is to be paid in advance {within 5 business days of receiving this confirmation} and will be applied toward the balance. Non refundable with less than 30 business days notice of cancellation prior to your event. Call (607) 732-8440.

Balance due: _____

*Your event is staffed by volunteers who will make every effort to ensure a memorable experience. In many cases, they are scheduling your event around their job hours. Kindly, adhere to the time frame scheduled. Parties are responsible for the setting up and clean up within the time you have scheduled for your event.

Thank you so much for supporting the Eldridge Park Carousel!