

FLUVANNA COUNTY DEPARTMENT OF PARKS & RECREATION P.O. Box 70, Palmyra, VA 22963 434-589-2016 <u>KAYAK RENTAL FORM</u>

Applicant/Organization Name:				Date(s) Reserve:	
		nust be present during			
Address:			Email: (City, State, Zip)		
—	(Street Address)		(City, State, Zip)		
Phone (Day):(Evening)			(Ce	ell)	
date(s) inc	licated and in the on I agree to pay any	condition received. and all costs asso	If any item is lost, d ciated with said iten	o return the said items by the amaged or destroyed while i n(s) repair or replacement.	
	Date_	51g	nature		
				RESIDENT FEES:	
			(\$25 pe	er Kayak) weekday rental	
	OLIANITITY		(\$60 p	oer Kayak) weekend rental	
<u>QUIPMENT</u>	<u>QUANTITY</u>	<u>FEE</u>			
KAYAKS					
PADDLES			<u>NON-RESIDENT FEES:</u> (\$35 per Kayak) weekday rental		
LIFE VEST			(\$70 per Kayak) weekend rental		
TRAILER			(+, • •		
TOTAL					
*:	**BUNGEE CORDS	STRAPS TO BE ISS	ich canoe/kayak (s) SUED ONLY WHEN R URN HOURS 10AM	ENTING THE TRAILER***	
		Office Us	se Only		
Rental items issued by (Employee):				Date:	
Deposit Amount				<u>Rental Amount</u>	
Check #	# Cash:		Check #	Cash	
	Signature	person receiving d	eposit)	Date	