

Engelstad Scout Park  
7220 S. Paradise Road, Las Vegas, NV 89119  
Las Vegas Area Council, Boy Scouts of America

**RESERVATION FORM**

Organization \_\_\_\_\_ Date Received \_\_\_\_\_

Contact Person for billing and arrangements \_\_\_\_\_

Responsible Person for event \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (Business) \_\_\_\_\_ (Home) \_\_\_\_\_

Fax \_\_\_\_\_ (Email) \_\_\_\_\_

Date(s) Needed \_\_\_\_\_ Time Needed (to include your setup time) \_\_\_\_\_

Number of Persons in Attendance \_\_\_\_\_

- \_\_\_ I understand there is no smoking in the park. Smoking is allowed only in authorized smoking area.
- \_\_\_ No alcohol is allowed in the facility.
- \_\_\_ No glitter or confetti
- \_\_\_ I understand any use of the park in addition to the hours indicated on this reservation form may be billed separately to include extra security.

Total Fees \_\_\_\_\_ Payment By  Check  Cash  Credit Card

Agreed To By \_\_\_\_\_

Authorized Signature

<b>For Council Use</b>	
___ Council Calendar	___ Director of Support Service