



GREENHORN MEADOWS PARK RESERVATION FORM

Name or person responsible for this reservation: _____
Mailing Address _____
City _____ State _____ Zip _____
Phone Number: _____ Email: _____
Area Reserved: @ \$75/half day _____
@ \$125.00/day _____
Site Address: 7500 Hwy. 165W, Colorado City, CO 81019
Date(s) Reserved: _____

IF ALCOHOLIC BEVERAGES ARE CONSUMED DURING YOUR FUNCTION, AN ALCOHOL PERMIT FROM CCMD IS REQUIRED. The park and campground will be patrolled by the Pueblo Count Sheriff's Department and our park patrol to enforce these rules!

CCMD Alcohol permit required: Yes _____ No _____
(Fee \$50.00) Okayed by CCMD Board on Date: _____

Security Deposit*: _____ **Date Due:** _____
*refundable provided area is left in a clean, unharmed state

Total Fees Due _____ **Date Due:** _____

Please make checks payable to CCMD. If payment is not received by the above date your reservation will be cancelled.

FULL REFUND GIVEN ONLY WITH ONE MONTH ADVANCED CANCELLATION NOTICE.

I/We have read the Rules and Regulation sheet and agree to abide by all requirements. I/We further agree to self-enforce the terms of the Alcoholic Permit (if alcoholic beverages are consumed during our function). I/We further agree to hold the Colorado City Metropolitan District harmless in the event of accident or injury resulting from the use of the above reserved facilities.

Signed _____ Date _____