

ED WELLINGTON
MAYOR

BRENDA L. KUHN
MUNICIPAL CLERK

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"BEACH CHAIRS" RESERVATION AND SIGN OUT SHEET

Name, Permanent Address & Telephone #: _____

Driver's License # _____

Address & Telephone # Where the Chair will be kept: _____

Address (Which Beach) where Chair will be used: _____

DATES REQUESTED: _____

DATES APPROVED: _____

SIGNATURE: _____ DATE: _____

SIGNATURE OF BORO OFFICIAL: _____

Please keep the chair in a secure area when not being used and
Rinse after each beach use.

***THE BEACH CHAIR PROGRAM IS FUNDED COMPLETELY
BY DONATIONS.***