

**JORDAN LAKE STATE RECREATION AREA
PICNIC SHELTER APPLICATION**

Requested by _____
Name of Organization
Address _____
Street, Route or Box # City State ZIP
Telephone _____

Hereby make application for the use of

	SHELTER #	RECREATION AREA	DATE
Choice #1 _____	_____	_____	_____
Choice #2 _____	_____	_____	_____
Choice #3 _____	_____	_____	_____

Number of Participants: _____

Reservations for the picnic shelters do not cover the entrance fee, nor do they guarantee parking in these areas. Entrance fees are charged daily from Memorial Day through Labor Day and on weekends only during April, May and September.

ENTRANCE FEES

- \$ 5.00 per vehicle per day
- \$ 3.00 per vehicle per day – Senior Rate (Age 62+)
- \$ 10.00 per bus per day

Only the shelter building is reserved. Restrooms and parking spaces adjoining beaches are **NOT** included in the reservation.

Participants must arrive before 12:00 noon on Saturdays, and Sundays in May, June and July to ensure entry. When the parking lot is full, no one is allowed to enter.

Change or Cancellation: Any changes or cancellations made before the close of business the 14th day prior to the scheduled arrival date will result in a \$10 service charge. (Exception: Jordan Lake State Recreation Area, White Oak Shelter facility \$125 service charge.) No refunds will be issued for no-shows or cancellations made less than 14 days prior to the scheduled arrival date. No refunds with in 14 days, but can reschedule for another date but will result in a \$10 service charge. (Exception: Jordan Lake State Recreation Area, White Oak Shelter facility \$125 service charge.) Refunds will be made using the same method of the original transaction.

Full payment must accompany each reservation application. All checks should be made payable to Jordan Lake SRA and mailed to:

**Reservations
Jordan Lake SRA
280 State Park Road
Apex, NC 27523**

The undersigned hereby agrees to accept a permit if issued upon this application and the right to exercise the privileges granted thereby, subject to the terms, covenants, obligations and reservations expressed or implied therein, and which are set forth by the North Carolina Division of Parks and Recreation.

Signature Title

APPROVAL-The above request does not conflict with any planned program or schedule.

Signature of Approver _____ Receipt # _____ Date _____

Cancellation for refunds must be made at least two weeks in advance for a full refund, minus a \$10.00 processing fee.