



City of Ellisville
BLUEBIRD PARK AMPHITHEATER RESERVATION FORM
225 Kiefer Creek Road, Ellisville, MO 63021
www.ellisville.mo.us (636)227-7508

Name of Applicant: (must be over 21 years of age) _____

Name of Organization (if applicable): _____

Address of Applicant: _____

City, State, Zip Code: _____

Contact Phone Number: _____ Email: _____

Date requested: _____ Time requested: _____

Estimated Attendance: _____

Applicant Signature: _____

Please return this form to the Ellisville Park Admin. Building in Bluebird Park – 225 Kiefer Creek Rd. Ellisville, MO 63021 or email to: mmollet@ellisville.mo.us

For Office Use Only

Notes regarding rental and special stipulations: _____

Director Approval: _____ Date: _____

The Ellisville Police Department will receive a copy of the reservation form for any event with an anticipated attendance over 250 people.