



Reorder From:  
Jenkins Business Forms  
(800) 851-4424

PLEASE PRINT

SITE NO.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE: \_\_\_\_\_

DATE  
IN

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE  
OUT

UNIT LIC. NO. \_\_\_\_\_ STATE \_\_\_\_\_ MAKE \_\_\_\_\_ YEAR \_\_\_\_\_

E-MAIL: \_\_\_\_\_

FIRST VISIT

HOW DID YOU HEAR OF US?

RETURN VISIT

CHECK ONE



NUMBER IN FAMILY

ADULT CHILD GUEST PETS

Camping Fee \$

**NOTICE TO GUEST**

**This property is privately owned. We reserve the right to refuse service to anyone and will not be responsible for accidents or injury to our guests or for loss of money or valuables of any kind.**

Heating & AC \$

Sewer \$

Additional Persons \$

Total Daily Charges \$

**THE MANAGEMENT**

**I AGREE TO READ AND COMPLY WITH ALL CAMPGROUND RULES AND REGULATIONS AS POSTED IN THE OFFICE AND/OR ON THE GROUNDS.**

No. Nights **X** \$ \$

Tax \$

SUB-TOTAL \$

Tax \$

TOTAL CHARGES \$

IF YOU HAVE ANY SPECIAL NEEDS OR NEED ASSISTANCE, PLEASE CONTACT THE OFFICE.

Less Advanced Deposit \$

**BALANCE DUE \$**

**X**

CAMPER'S SIGNATURE

**COMPANY NAME**

Address

City State Zip

Telephone & Fax

Advertising Line