



RV Park Rental Application

(Please Print Legibly)

Renter Information				
Name: _____		Phone # _____		
Home Address: _____	City: _____	State: _____ Zip Code: _____		
Email: _____				
Emergency Contact				
Name: _____		Contact Phone # _____		
Email: _____				
Vehicle Information				
RV	Other Vehicles			
RV License Plate Number: _____ State: _____	1. Make: _____ Model: _____ Color: _____ LP # _____ State: _____			
	2. Make: _____ Model: _____ Color: _____ LP # _____ State: _____			
Booking Information				
No Person shall camp for more than seven (7) consecutive days or more than fourteen (14) days within any Calendar month. Check-in is at 3:00 pm and check out is noon.				
Fee	Arrival & Departure Dates			
RV Rate \$20.00 per night	Arrival Date: _____	Number of Days: _____		
	Departure Date: _____			
Miscellaneous				
<i>Reason for your stay. (optional)</i>				
Office Use Only				
Payment	RV Camp Site			
<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Amount Owed: _____	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8

(Print) Name of Applicant: _____

Signature: _____ Date: ____ / ____ / ____