

# SEASONAL INFORMATION SHEET

Seasonal's  
Name(s): \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

## **Print First and Last Names of All People in Campsite Party**

Check if Under the Age of 18

_____	_____
_____	_____
_____	_____
_____	_____

Pet(s) Name(s)	Breed	Disposition	Vaccination Records (Copy in camper)
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_____	_____	_____	_____
_____	_____	_____	_____

Model of Camping unit: \_\_\_\_\_ License # \_\_\_\_\_ State: \_\_\_\_\_

Make/Model of Vehicle: \_\_\_\_\_ License # \_\_\_\_\_ State: \_\_\_\_\_

Make/Model of Vehicle: \_\_\_\_\_ License # \_\_\_\_\_ State: \_\_\_\_\_