

Rocky Face Mountain Recreational Area Camping Contract

Group Information:

Group Name: _____
 Contact Person: _____
 Address: _____

 Day Phone: _____
 Evening Phone: _____
 Email Address: _____

 Camping Date(s): _____
 # Camping per night: _____
 Campsite: _____

Price Per Night:	_____
Total Due:	_____

Terms: _____
 (Cancellations must be received one week prior to reservation date)

Signature	Date
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OFFICE RECORDS ONLY:

Date: _____

Park Attendant: _____

Camping Contract	YES	NO
Camping Guidelines	YES	NO
Campsite Description	YES	NO
General Park Rules	YES	NO
Participant Agreement	YES	NO

Date Added to Calendar: _____

Date Added to Website: _____

Invoice # _____

Balance Received _____

Check-in Date/Time: _____

Water available at site	YES	NO
Site clean of debris	YES	NO
Firewood available	YES	NO

Check-Out Date/Time: _____

Damage Reported	YES	NO
Damage Amount	YES	NO