



VEHICLE CHECK-IN FORM

To EXPEDITE your CHECK-IN this form must be completed and returned to us. All vehicles in your group need to fill one of these out. Please take this to the office to register and have valid I.D. available. A signature from everyone in the vehicle is required for our liability form. Parents may sign for minors.

Reservation Information

Name of Reservation Holder: _____

Group Name: _____

Arrival Date: _____

Departure Date: _____

Campsite #: _____

Driver Information

Driver Name: _____

Vehicle Description: _____

Color: _____

License Plate #: _____ State: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Cell #: _____

Email: _____

Vehicle Occupants

How many Adults 13 or older? _____

Youths 8 - 12: _____

Children under 7: _____ Pets: _____