

EATON COUNTY CAMPING REGISTRATION

FAMILY NAME: _____ CAMPING DATES: _____
From _____ To _____

ADDRESS: _____
Street City State Zip

CLUB NAME: _____ PHONE: _____

UNIT TYPE: _____ SIZE: _____

UNIT LICENSE NUMBER: _____ VEHICLE LICENSE NUMBER: _____

NAMES OF ALL PERSONS CAMPING IN THIS UNIT: *List adult in charge of this unit on line 1

*1	6
2	7
3	8
4	9
5	10

FOR OFFICE USE ONLY

AMOUNT DUE: _____ AMOUNT PAID: _____ DATE PAID: _____

CK NUMBER: _____ RECEIVED BY: _____

COMMENTS: _____

1. Camper Receipt 2. Unit I.D. Tag 3. Camp Office

WARNING: FINE OF \$15.00 FOR REMOVING ANY WATER AIRY-A-TORS

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