

CAMPSITE RESERVATION



Park Name	Emerald Lake Regional Park		Date	Park Fax	306-466-4776	Park Email	elrpmanager@outlook.com				
Name				Address							
City/Town				Prov/State		Postal / Zip Code			Country		
Home Phone				Work Phone				Cell			
Email				Total # in Party		Adults		Children		Pets	
Group		Group Name?				Would you like to be nearby?					
Arrival Date							Departure Date				
	Month	Day	Year					Month	Day	Year	
Period of Stay:			Daily			Weekly			Monthly		

Please indicate the type site and service you require:

Site: Tent	<input checked="" type="checkbox"/>	Services: Water	<input checked="" type="checkbox"/>
Van or Pick Up Camper	<input type="checkbox"/>	30 Amp Water	<input type="checkbox"/>
Tent Trailer	<input type="checkbox"/>	30 Amp Water/Sewer	<input type="checkbox"/>
5 th Wheel _____ Length	<input type="checkbox"/>	Cabin Rental	<input type="checkbox"/>
Motor Home _____ Length	<input type="checkbox"/>	Cabin Deposit	<input type="checkbox"/>

Slide Out	Y	N	Awning	Y	N	Shade	Y	N
Sunny Site	Y	N	Near Playground	Y	N			
Near Washroom	Y	N	Barrier Free	Y	N			

	1 st	2 nd	3 rd	4 th	5 th
Please provide preferred campsite #, if provided on map, also indicate your 2 nd , 3 rd , 4 th , 5 th choice.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Payment Amount:	<input type="text"/>	Payment Method:	Cash	Cheque	Visa	MC	Interac
Card Number		CVC#	Exp Date		Month	Year	

Signature of Applicant _____
Date

PARK OFFICE USE ONLY					
Date Received:	_____ Received By:	_____ Deposit Paid:	_____ Camp Site #	_____ Sent Via:	_____ Fax
Other Amt Paid	_____ Confirmation #:	_____ Sent By:	_____ Sent Via:	_____ Email	_____ Mail
Date Confirmation Sent	_____ Secure Site: Yes	_____ No	_____ (Circle One)	_____ Fax	_____ Email

If you use an internet e-mail provider such as Hotmail or Yahoo, please save the completed form and e-mail it as an attachment.