



CAMPSITE RESERVATION FORM

"Cancellation Policy for each reservation is one days fee in your site when cancelled at any time prior to your stay"

Park Name:	Moosomin & District	Date:		Park Email:	moosominregionalpark@sasktel.net
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Name:				Address:				
City/Town:		Prov/State		Postal/Zip Code		Country:		
Home Phone:				Work Phone:			Cell:	
Email:			Total # in Party		Adults		Children	Pets

Are you with a Group?	Name:				Do you wish to be located nearby?	Y		N	
Arrival Date:	Month	Date	Year	Departure Date:	Month	Day	Year		

Please indicate the type of site and service your require: Check box

Site: Tent _____	Services: Non Serviced _____
Van/Pick Up Camper _____	Tenting _____
Tent Trailer _____	15 Amp _____
5th Wheel _____ Length _____	30 Amp _____
Motor Home _____ Length _____	15 Amp & Water _____
Travel Trailer _____ Length _____	30 Amp & Water _____
Slide Out Y _____ N _____	Sunny Site Y _____ N _____
Awning Y _____ N _____	
Near Playground Y _____ N _____	Near Washroom/Shower Y _____ N _____
	Barrier Free Y _____ N _____

Please provide preferred campsite #, if provided on map, also indicate your 2nd, 3^d, 4th, 5th choice.

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Payment Amount:	<input type="text"/>	Payment Method:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>	Interac <input type="checkbox"/>	MC <input type="checkbox"/>	Visa <input type="checkbox"/>
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Card Number	CVC#	Expiry Date:	Month	Year
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Signature of Applicant _____

Date _____

PARK OFFICE USE ONLY

Date Received: _____	Received By: _____	Deposit Paid: _____
Other Amt Paid: _____	Confirmation #: _____	Campsite #: _____
Date Confirmation Sent: _____	Confirmation Sent By: _____	Sent Via: _____ (circle one) Fax Email Mail
Secure Site: Yes _____ No _____		

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