WHITE MOUND COUNTY PARK CAMPGROUND - RESERVATION FORM

SECTION A: GENERAL INFO. COMPLETE ALL BOXES:

Na	ıme:										
Ad	dres	SS:									
City:			Sto	State:		Zip:	Zip:				
Em	nail:										
Ph	one	number:									
Arrival date:			De	Departure date:							
		Number of adults, 4 maximum, 18	3+ ye	years of age							
		Number of children, 6 maximum									
		Number of pets, 3 maximum	pets, 3 maximum								
1st	st campsite choice:			2nd campsite choice:							
3rc	rd campsite choice:			4th campsite choice:							
SE	СТІС	ON B: CAMPING FEES. COMPLI	ETE	ONE	LINE ON	NLY:					
	Ele	ctric campsite, \$25 per night	X	Nu	mber of	nights =		Total B			
	No	nelectric campsite, \$20 per night	X	Nu	mber of	nights =		Total B			
	Но	rse campsite, \$30 per night	X	Nu	mber of	nights =		Total B			
SE	CTIC	ON C: VEHICLE ADMISSION. CO	OMP	LETE	ONE LI	NE ONLY:					
	1 d	aily parking pass, \$5 per night	X	Nu	mber of	nights =		Total C			
	2 d	aily parking passes, \$10 per night	X	Nu	mber of	nights =		Total C			
	1 ai	1 annual parking pass, \$25						Total C			
	2 a	nnual parking passes, \$40						Total C			
	l ho	ave the annual parking pass(es)				Pass num	ber(s)				
SE	СТІС	ON D: TOTALS, RULES & POLIC Total B	IES.	СОМ	PLETE A	ALL BOXE	ES:				
		Total C									
đ	5	Reservation fee									
*	5										
		Grand total									

The undersigned affirms that they have read and fully understand the White Mound County Park Rules and Policies found at www.co.sauk.wi.us/parksandrecreation/camping-reservations

Cianatura:		
Signature:		