

FOR THE YEAR 2012

REQUEST FOR CAMP EVANGELINE RESERVATIONS

FOR OFFICE USE ONLY

UNIT ASSIGNED: _____

OF WEEKS: _____

NAME: _____

MAILING ADDRESS: _____

Note change of address

TELEPHONE: _____

E-MAIL ADDRESS: _____

HOW MANY DO YOU EXPECT TO BE IN YOUR PARTY NEXT YEAR? _____

PLEASE CHECK THE FOLLOWING: () KICK OFF WEEKEND

() FOR FIRST WEEK ONLY () FOR SECOND WEEK ONLY () FOR BOTH WEEKS

() SINGLE CABIN () DOUBLE CABIN () SINGLE ROOM () MARITIME COTTAGE

() FAMILY COTTAGE () LODGE () FRASER () NEW SINGLE CABIN () OTHER

WHAT NUMBER DO YOU PREFER? ROW: _____ NO: _____

FOR TRAILERS:

WHAT TYPE OF TRAILER DO YOU OWN?

() REGULAR "HOUSE" TYPE () TENT TRAILER () CAMPER

() "HARD TOP" TRAILER () OTHER

WOULD YOU PREFER A SEWER, IF AVAILABLE? () YES () NO

WHERE DO YOU WISH TO LOCATE?

() RIVERSIDE () RIVERSIDE EXTENSION () UPPER FIELD **NO:** _____

DID YOU OCCUPY THE ABOVE ACCOMMODATION THIS YEAR? () YES () NO

YOU WILL BE NOTIFIED LATER AS TO THE AVAILABILITY OF THE REQUESTED ACCOMMODATION cp-reque.12