



Seasonal Lottery Invitation Request Application

*Application must be complete in order to be considered for invitational lottery. A valid email, phone number and address must be provided in order to be considered.

A photo of each side of your camper/RV is required and must be attached to this application for consideration.

SUBMITTING AN APPLICATION DOES NOT GUARANTEE THAT YOU WILL BE ENTERED INTO A LOTTERY. YOUR APPLICATION MUST QUALIFY FOR THE AVAILABLE SITES AND MEET CAMPGROUND REQUIREMENTS.

Date: ____/____/____

Primary First Name: _____ Primary Last Name: _____

Spouse's First Name: _____ Spouse's Last Name: _____

Permanent Home Address: _____

P.O. BOX Address: _____

City/Town: _____ State/Province: _____ Zip Code: _____

Primary Phone: (____) ____ - ____ Secondary Phone: (____) ____ - ____

Email Address: _____ SSN: ____ - ____ - ____

Primary Drivers license: _____ Secondary Drivers License: _____

Make/Model of Camper/RV: _____/_____

Vin Number of Camper/RV: _____ Year of Camper/RV: ____/____/____

Length of Camper/RV: ____ Feet, from tongue to tail bumper.

Minimum Amps of Camper/RV: ____ Amps. Amount of Slide Outs on Camper/RV: ____ Slide Outs.

Make/Model of Boat: _____/_____

Registration/VIN Number for Boat: _____/_____

Make/Model of Jet Ski's/other Watercraft: _____/_____

Registration/VIN Number for Jet Ski's/other Water: _____/_____

Primary Vehicle Make/model: _____/_____ Vehicle Year: ____/____/____

Secondary Vehicle make/model: _____/_____ Vehicle Year: ____/____/____

Primary Vehicle Tag Number: _____ Secondary Vehicle Tag Number: _____

Is Primary Applicant Retired? Yes ____ No ____ Is Secondary Applicant Retired? Yes ____ No ____

Primary (Current or Past) Occupation: _____

Secondary (Current or Past) Occupation: _____

Will other Family Member(s) be occupying with you full-time at your Campsite? Yes ____ No ____

If yes, list the Name and Relationship of the Individual(s) to you:

First Name: _____ Last Name: _____

Relationship: _____ Drivers License Number (If Applicable): _____

First Name: _____ Last Name: _____

Relationship: _____ Drivers License Number (If Applicable): _____

First Name: _____ Last Name: _____

Relationship: _____ Drivers License Number (If Applicable): _____

First Name: _____ Last Name: _____

Relationship: _____ Drivers License Number (If Applicable): _____

Are you currently under investigation for a felony charge or have you ever been convicted of a felony?
Yes ____ No ____

If yes, tell us the nature of the offense(s) City and state of the arrest and conviction.

Detail(s) of Conviction: _____

In the event this information is falsified, this contract will be terminated immediately.

List three persons not related to you as references:

1. First Name: _____ Last Name: _____

Relationship: _____ Phone Number: (_____) _____ - _____

2. First Name: _____ Last Name: _____

Relationship: _____ Phone Number: (_____) _____ - _____

3. First Name: _____ Last Name: _____

Relationship: _____ Phone Number: (_____) _____ - _____

To the applicant(s):

Once submitted, your application is good for the entire season and will be kept on file for each lottery held. If you are a previous Seasonal Site holder and was asked to leave the park for violation(s) listed: Failure to pay campsite fee at the first of the month, sanitary/litter violations, acts of violence, and violation of Observation Knob Park & Campground Rules, you may submit the application at the management's discretion. All applicants will be approved or denied for the lottery by Park Manager or Park Manager's designee. All campers must be 21 years of age or older to rent a campsite and/or occupy, adult presence required. Only those interested in the campsite, that would be listed on the contract should you obtain a site through the lottery, can complete and submit this application. Having someone complete and submit and/or participate in the lottery, should you be invited, will disqualify you and you will not be able to participate in future lotteries.

I understand that I/we may be asked to provide date of birth, driver's license number(s), and social security number(s) for this application process. I understand that I/we may be subject to a background check. I/we understand (if currently occupied) may be asked to move (relinquish current campsite) to a different campsite, or to leave the campsite (and pay any owed debt to the park) if asked by park management. I understand that I/we may not be entered into the lottery. And if I do, I understand that I may not receive a campsite for seasonal campers/camping. I/we understand that a late fee will be applied to my/our account if payment is not received by the tenth of every month (summer & winter months). I/we understand to notify the office of any address change and/or phone number change.

I certify that all information contained in this application is true and correct.

1. Applicant's Signature: _____ Date: ____/____/____

2. Applicant's Signature: _____ Date: ____/____/____

For Park Office/Manager /Office Manager Designee Use only

Date Application was Received: ____/____/____ Contacted Applicant(s): Yes ____ No ____

Conducted Interview: Yes ____ No ____ Checked References: Yes ____ No ____

Hold on File: Yes ____ No ____ Signature: _____