## In The Pines Seasonal Camp-Resort Guest Check-In For Night & Day Guests Using Facilities Is \$5 Each For 6 & Up

Site #:		Printed Name(s):								
No. of Adults:		No. of Kids (6 & up):		No. of Kids (5 8		<u>Under):</u>	Do you have a dog? Y/N		Dog Records on File? Y/N	
Printed Address:						City/Sta	ate/zip:			
Phone #:			Emergen	cy Contact &	<u>Vehicle?</u> Vehicle Lic #:  Y/N					
Guest Signature:					<u>Legal</u>	Guardia	n Signature	for Minor:		
Day Guest		Night Guest		Season P	Pass					
Arrival Date:	Der	oart Date:	# Nights:	Gate Pass: Y/N	Sign	ature:			<u>Due</u>	Office Initial:
Arrival Date:	Der	oart Date:	# Nights:	Gate Pass: Y/N	Sign	ature:			<u>Due</u>	Office Initial:
Arrival Date:	<u>De</u> p	oart Date:	# Nights:	Gate Pass: Y/N	Sign	ature:			<u>Due</u>	Office Initial:
Arrival Date:	<u>De</u> r	oart Date:	# Nights:	Gate Pass: Y/N	Sign	ature:			<u>Due</u>	Office Initial:
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