

HAUNT-ON PARKING PERMIT

DRIVER'S NAME _____

PACK # _____

Date of Visit 10/29/2021-10/31/2021

Cell Phone Number _____

FILL OUT THE ABOVE INFORMATION UPON ARRIVAL IN CAMP

**BE SURE TO KEEP YOUR CAR KEYS WITH YOU AT ALL TIMES
PLACE IN CLEAR VIEW ON INSIDE LEFT DASHBOARD**

ALWAYS PARK FACING OUT

HAUNT-ON PARKING PERMIT

DRIVER'S NAME _____

PACK # _____

Date of Visit 10/29/2021-10/31/2021

Cell Phone Number _____

FILL OUT THE ABOVE INFORMATION UPON ARRIVAL IN CAMP

**BE SURE TO KEEP YOUR CAR KEYS WITH YOU AT ALL TIMES
PLACE IN CLEAR VIEW ON INSIDE LEFT DASHBOARD**

ALWAYS PARK FACING OUT