

HAUNT-ON PARKING PERMIT

DRIVER'S NAME _____

Date of Visit 10/28/2022-10/30/2022

Cell Phone Number _____

FILL OUT THE ABOVE INFORMATION UPON ARRIVAL IN CAMP

PLACE IN CLEAR VIEW ON INSIDE LEFT DASHBOARD

BE SURE TO KEEP YOUR CAR KEYS WITH YOU AT ALL TIMES

ALWAYS PARK FACING OUT

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