

# Town of Minerva Campsite Registration Form

Permit Holders Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any guest *staying* at your campsite – **Maximum of 4 adults (18+) per site.**

Registered Guests	Date of Birth	✓18+	Minerva Resident	
1)			Yes	No
2)			Yes	No
3)			Yes	No
4)			Yes	No
5)			Yes	No
6)			Yes	No
7)			Yes	No

Please list any pets you are bringing with you and **attach proof of inoculation:**

	Breed of Animal	Animal Name
1)		
2)		

Car Lic. No.: \_\_\_\_\_ State: \_\_\_\_\_  
Car Make: \_\_\_\_\_ Year: \_\_\_\_\_  
Camper make & model: \_\_\_\_\_  
Please circle: Tent / Pop up / Camper / Tow along / RV / Other

Date in: \_\_\_\_\_ Date out: \_\_\_\_\_ # of nights: \_\_\_\_\_

I have received and read the Campground rules and I understand and agree to abide by them.

Permit Holders Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**To reserve your campsite:**

**Call 518-251-2869 to ensure we have a site available for your need and then return this form to our office as soon as possible.**

**By email; [admin@townofminervany.gov](mailto:admin@townofminervany.gov)**

**By mail; Town of Minerva Campground, PO Box 937, Minerva NY 12851**

**By fax; 518-251-5136 (please call to confirm it was received)**

Office Use Only		
Permit #:	Date Issued:	Site #:
Number of nights:	Payment Amount: \$	
Payment Type:		
<input type="checkbox"/> Credit Card	<input type="checkbox"/> Cash Receipt #:	<input type="checkbox"/> Check #:
Notes:		