

PLEASE MAKE CHANGES TO THE INFORMATION LISTED BELOW IF INCORRECT.

CECO# \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PRIMARY PHONE # \_\_\_\_\_

SPOUSES NAME \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

EMAIL \_\_\_\_\_

YOUR EMPLOYER \_\_\_\_\_ / OR RETIRED FROM \_\_\_\_\_

**YOUR UNMARRIED CHILDREN LIVING WITH YOU**

<u>Name &amp; Age</u>	<u>Name &amp; Age</u>	<u>Name &amp; Age</u>
_____	_____	_____
_____	_____	_____

**VEHICLES** MUST BE REGISTERED TO YOU, YOUR SPOUSE OR YOUR UNMARRIED CHILDREN LIVING WITH YOU. PLEASE INDICATE WHICH TWO VEHICLES WILL HAVE THE TWO DECALS.

<u>OWNER</u>	<u>MAKE / MODEL / COLOR</u>	<u>LICENSE PLATE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>CAMPING EQUIPMENT/ MAKE &amp; TYPE</u>	<u>LENGTH</u>
_____	_____
_____	_____

**BOATING**

- YES** - I OWN A BOAT. MY SIGNED BOATING FORM IS ENCLOSED. YOU WILL RECEIVE STICKERS FOR BOATS LISTED ON THE FORM ALONG WITH PROOF OF INSURANCE.
- NO** - I DO NOT OWN A BOAT

**UNLICENSED VEHICLE ATV/GOLF CART**

- YES** - I OWN AN ATV/GOLF CART. MY SIGNED FORM IS ENCLOSED, INSURANCE INFORMATION IS LISTED OR A COPY OF THE POLICY IS ATTACHED.
- NO** - I DO NOT OWN AN ATV/GOLF CART