



Overnight Reservation Application



NAME OF PARK, FOREST OR RECREATION AREA (see reverse side) _____

TYPE OF FACILITY: ☐ Cabin ☐ Family Campsite ☐ Group Campsite ☐ Wilderness Campsite
☐ Group Cabin ☐ Lean-To ☐ Shelter ☐ Yurt ☐ Primitive Campsite

TYPE OF EQUIPMENT: ☐ Tent ☐ Tent Trailer ☐ Travel Trailer ☐ Pickup Camper ☐ Other: _____

RESERVATION REQUEST FROM (Month, Day, Year) _____ Site, Cabin, Lean-to,
TO (Month, Day, Year) _____ Shelter or Yurt # _____

ALTERNATE REQUEST FROM (Month, Day, Year) _____ Site, Cabin, Lean-to,
TO (Month, Day, Year) _____ Shelter or Yurt # _____

APPLICANT'S NAME (Contact Person for Groups) _____

ADDRESS _____

E-MAIL ADDRESS _____ NO. IN PARTY _____

NAME OF ORGANIZATION (for Groups) _____

DAYTIME TELEPHONE NO. () _____ ☐ Listed ☐ Unlisted EVENING NO. () _____ ☐ Listed ☐ Unlisted

APPLICANT'S DRIVER'S LICENSE NO. _____ (State) _____

VEHICLE _____ (Make) _____ (License Plate No.) _____ (State) _____

Please see reverse side for information on Overnight Facilities

Reservations for overnight facilities can be made up to 11 months in advance in person, by mail or by telephone (during normal business hours) using a credit card.

Payment in full must be made at the time of reservation. Please refer to the chart on the back to determine the total fee. Payment can be made by cash, check, money order or credit card. Checks and money orders are to be made payable to "Treasurer, State of New Jersey". Reservations are non-transferable.

Only one reservation change is permitted prior to occupancy. If reservations are cancelled 24 hours prior to occupancy, your payment is refundable minus a \$40 cancellation fee or 2 nights stay, whichever is less. If reservation cannot be granted, full payment will be returned.

Applicants must be 18 years of age or older. Alcoholic beverages and pets are not permitted in overnight or camping facilities.

APPLICANT'S SIGNATURE _____ Total Amount \$ _____

NOTE: Information provided on this application may be subject to review and inspection under the Open Public Records Act (NJSA 47:1A-1)

Method of Payment

Check one: ☐ Cash ☐ Check or Money Order ☐ Credit/Debit Card

Billing Address: If you are using a credit card, make sure the address above is where you receive your credit card statement.

Credit/Debit Card (i.e. MasterCard, Discover, Visa, etc.) _____

Credit/Debit Card Number _____ Expiration Date _____

Signature of Cardholder _____ Date _____

For specific information about camping, cabin facilities, reservation procedures, and accessibility for persons with disabilities, please contact the individual parks, forests and recreation areas which offer camping.

NOTE: Fees are subject to change

Visit us on the Web at www.njparksandforests.org