

**SUNFOX CAMPGROUND**

Mailing Address: 15 Kenyon Rd. Lisbon CT 06351  
Telephone: 860-376-1081 email: camp@sunfoxcampground.com

**2019 LONG TERM SITE REGISTRATION**

NAME OF REGISTRANT: \_\_\_\_\_  
Last First Middle

SITE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

RESIDENT ADDRESS: \_\_\_\_\_

*(must be other than Sunfox)* \_\_\_\_\_

HOME PHONE: (Include Area Code) \_\_\_\_\_ CELL (optional): \_\_\_\_\_

TOTAL NUMBER OF REGISTERED & PAID PERSONS IN CAMPING PARTY: \_\_\_\_\_

PLEASE LIST NAMES OF ALL PERSONS IN REGISTERED PARTY. **BASE RATE COVERS 2 PEOPLE.** INCLUDE AGES AS OF APRIL 1, 2019 OF ALL PERSONS UNDER 21 YEARS OF AGE:

Name	Age	Name	Age
1 _____	XX	2 _____	XX
3 _____	_____	4 _____	_____
5 _____	_____	6 _____	_____

**CAMPING VEHICLE:** VIN NUMBER: \_\_\_\_\_

YEAR: \_\_\_\_\_ MODEL: \_\_\_\_\_

MAKE: \_\_\_\_\_ COLOR: \_\_\_\_\_

LENGTH: \_\_\_\_\_ REGISTRATION (IF ANY): STATE \_\_\_\_\_ NUMBER \_\_\_\_\_

List any other persons you would want us to contact in case of an emergency, or any additional phone numbers you wish us to have. \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Registrant