

2018 Parking Request

Responsible Person:

Phone number:

Address for permit to be mailed to:

Email address:

County:

Size of Unit:

| Zone | Camping Spot |
|------|--------------|
|------|--------------|

1st choice

2nd choice

3rd choice

Assigned camping location:

Early Entry Fee (\$20) Included

| | |
|--|--|
| | |
|--|--|

Parking Permit sent

EARLY ENTRY Plackard sent

Date Sent:

Return completed form and early entry fee (if desired) to:

Gail M. Chambers
6772 West 3200 South
Rexburg, ID 83440
208-351-4568