



Monthly Rental Application

For adults (18 or over) .

Applicant Name: _____ SS# _____

Birth Date: _____ Driver's License: _____ Vehicle Make/Model _____

Number of family members? Adults ___ Children ___ Number of Pets: Dogs? ___ Cats? ___

Spouse Applicant: _____ SS# _____

Birth Date: _____ Driver's License: _____ Vehicle Make/Model _____

Camper Year/Make/Model: _____

Note: A current picture may be required for older units.

Current Address (City/St/Zip): _____

Company/Employer: _____ Phone #: _____

Position: _____ How Long at job? _____

Personal/Credit References (no family please):

Name	Relationship	Phone #
_____	_____	_____
_____	_____	_____

Additional Information:

I declare that the information provided in this application is true to the best of my knowledge and that I will abide by the rules and regulations set forth for Arrowhead Point RV & Cabin Camp. You are hereby authorized to verify my background/employment history/references for this application process.

Date: _____ Applicant's Signature: _____

We take pride in having a beautiful and peaceful place for people to enjoy, and we will strive to keep it that way. We reserve the right to refuse any applicant. Thank you for considering staying with us!