

Debonair Campground Annual Remittance Form for Campsite # _____

I the undersigned have read this year's Campground Policy and agree to abide by it.

Policyholder SIGNATURE: _____ Date: _____

Printed Full name of Policyholder and Spouse (if applicable) _____

Mailing address including City, Province _____

Postal Code _____ Phone #: _____

Alt Ph # (ex.cell) _____ I consent to receiving Debonair E-News Bulletins Yes No
Please Circle

Email(s): _____
Updates, campground news and upcoming events will be emailed.

Workplace Name & Phone #: _____

Do you authorize permission for us to give out your campsite # and location to anyone who requests it? _____
Leaving this field blank will be considered a No.

Payment(s) enclosed with this remittance:

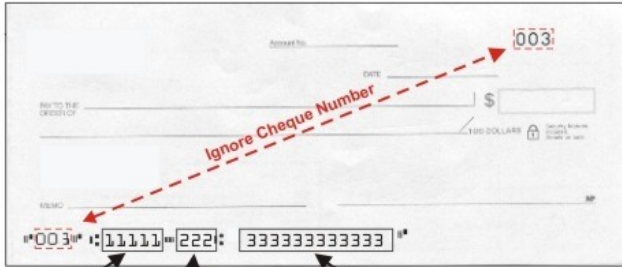
Please note we do not accept credit card for seasonal camping payments.

Plan 1 Full Payment or Plan 2 First Payment Amount: \$ _____ cash / cheque / PAD*
Please circle

Payable date _____

Plan 2 Second Payment Amount (if applicable): \$ _____ PAD* (No other form of payment is accepted for Plan 2)

Payable date _____
Must be payable on or before July 1 of this year



*If paying with pre-authorized debit (PAD), please forward the following information or send a Void cheque.

Transit #: _____

Bank ID/Route: _____

Account #: _____

Transit Bank ID Account Number ← max. 12 digits

Thank-you for choosing Debonair Campground!

Office Use: Date Remittance Received: _____