

# Powder Horn Family Camping Resort

## **2016 SEASONAL SITE AGREEMENT**

**\*\* Must be submitted with first payment, by September 1, 2015 \*\***

Powder Horn Family Camping Resort (PHFCR), located at 48 Cascade Road (P.O. Box 366), Old Orchard Beach, Maine 04064, allows the person(s) named below, a site to accommodate their RV in the campground.

Said site is to be available from May 6, 2016 through October 10, 2016, paying for, in advance, the fee, plus tax and electric deposit for said term, in accordance with the *2015 Seasonal Information and Rates*. Seasonal Occupant(s) agrees not to assign or sublet said premises, nor make any unauthorized alterations, nor carry on any trade or business therein; to conform to such reasonable rules and regulations as shall be established by PHFCR in connection therewith; to quit the same at the termination of said seasonal reservation; and leave the site in good condition and free of belongings, as found upon arrival.

It is mutually understood and agreed that PHFCR shall not be liable for personal injury or loss of life to Seasonal Occupant(s) and/or visitors nor shall PHFCR be responsible for damage to Seasonal Occupant's RV, additions, failure, power outage, wind, rain, flood, terrorist act or other casualty loss. The Seasonal Occupants will indemnify and hold PHFCR harmless from any loss, claim or action which PHFCR may be subject to, with respect to such loss, claim or action including PHFCR's attorney's fees. It is also mutually understood and agreed that said Seasonal Occupant(s) will carry a minimum of liability coverage insurance on their RV and all belongings.

It is mutually agreed that either party hereto may terminate said reservation, at any time, by giving the other party five days' notice, in writing, for that purpose. If said Seasonal reservation shall be terminated by said Seasonal Occupant, there will be no issue of a refund from PHFCR. If said Seasonal reservation shall be terminated by PHFCR due to violation of enclosed rules, regulations and deadlines, a pro rata refund may be issued to the Seasonal Occupant(s) at the option of PHFCR.

Legal fees incurred in the process of collecting unpaid and overdue accounts shall be paid by the Seasonal Occupant(s). Costs incurred for hauling or storing an unclaimed RV or other belongings after October 10, 2016 shall be paid by the Seasonal Occupant.

I, (print name) \_\_\_\_\_, have carefully read and reviewed with my entire family the enclosed rules, regulations and deadlines pertaining to site maintenance and payment schedules. I assume all responsibility for my spouse/partner, children, pets and any and all guests. I am aware that any violation to the aforementioned policies will result in immediate termination of my access to PHFCR's property.

Seasonal reservations are available for ONE IMMEDIATE FAMILY ONLY. Base rate includes a family of two.

PLEASE NOTE: one Seasonal window sticker given per Seasonal occupant age 22 and over.

Site #: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Make of RV: \_\_\_\_\_ Year: \_\_\_\_\_ Size: \_\_\_\_\_ ft. Model: \_\_\_\_\_

ADDITIONS: Deck (length x width) \_\_\_\_\_ x \_\_\_\_\_ Porch (length x width) \_\_\_\_\_ x \_\_\_\_\_

Shed (length x width): \_\_\_\_\_ x \_\_\_\_\_ Other: \_\_\_\_\_

☐

**Single Seasonal?** (Check box if yes. Please refer to page 6 of *Seasonal Info. and Rates Packet* to review your choices; you must elect either adding additional occupant(s), or receiving Visitor Bucks by May 1, 2016.)

**Seasonal Occupant 1:** Full Name \_\_\_\_\_ Home #: \_\_\_\_\_

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_ (vehicle will get Seasonal sticker)

**Seasonal Occupant 2:** Full Name \_\_\_\_\_ Home #: \_\_\_\_\_

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_ (vehicle will get Seasonal sticker)

**DEPENDENT CHILDREN** (check all that apply; ages 21 and under, \$100 each, plus tax, no seasonal sticker issued):

☐ **\$100** Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Drives? \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

☐ **\$100** Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Drives? \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

☐ **\$100** Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Drives? \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

☐ **\$100** Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Drives? \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

**ADDITIONAL FAMILY MEMBERS** (Immediate family members 22 years of age or over. \$200.00 each, plus tax):

☐ **\$200** Last: \_\_\_\_\_ First: \_\_\_\_\_ Relation to You: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

Email Address: \_\_\_\_\_

☐ **\$200** Last: \_\_\_\_\_ First: \_\_\_\_\_ Relation to You: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

Email Address: \_\_\_\_\_

☐ **\$200** Last: \_\_\_\_\_ First: \_\_\_\_\_ Relation to You: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Vehicle Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ Plate #: \_\_\_\_\_ Year: \_\_\_\_\_

Email Address: \_\_\_\_\_

**PET INFORMATION** (Maximum of 2 per site, Management approval required for more than 2):

Name \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_ lbs.

Name \_\_\_\_\_ Breed \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_ lbs.

**MOTORCYCLE REGISTRATION** - \$50.00 per motorcycle

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ Plate: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ Plate: \_\_\_\_\_

**EMERGENCY CONTACT PERSON** (someone that does not live in your household):

Name: \_\_\_\_\_ Relation to you: \_\_\_\_\_ Home #: \_\_\_\_\_

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_ E-mail: \_\_\_\_\_