GATEWAY CLUSTER OVERNIGHT PARKING
RESERVATION FORM

Name: ____________________________________________

Phone: ___________________ Cell Phone: ________________

Address: ___________________________________________

City/State/Zip Code: _________________________________

E-mail address (for notification from cluster): _____________

RV Length: ______ Tow Vehicles must be disconnected from RV's

RV Type: Class A motor home: ______ Class C motor home: ______

Fifth Wheel: ______, Travel Trailer: ______ Pop-up: ______

License number of unit: ______ State: ______ Arrival Date: ______

Departure Date: _______________ Number of dogs in RV: ______

Fee is $25.00 per night for full hookup, 50 amp electric, water & sewer

Amount enclosed: ___________ Signature: __________________

If RV spaces are filled, you will be notified by email and can choose to
locate in overflow lot. Fee is $15.00 per night - 50 amp electric and water
available to fill tanks. Refund price will be sent with notification.

Make checks or money orders and mail reservations to:
THE GATEWAY CLUSTER
PO Box 583
Park Hills MO 63601

Gateway Cluster Parking Chair: Cledith M Wakefield (573) 431-9246

All RV's MUST display parking permit issued by GATEWAY CLUSTER

Reservations will be accepted until Wednesday, September 7, 2011 at 12:00 noon