GATEWAY CLUSTER OVERNIGHT PARKING RESERVATION FORM

Name: _____

Phone: _____ Cell: _____

Address: _____

City/State/Zip: _____

Email: _____

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: _____

Date of Arrival: _____ Date of Departure: _____

Number of Dogs: _____

Fee is $25.00 per night – There are No Refunds
Overflow lot will be used after upper RV lot is sold out.
RV's must display parking permit issued by Gateway Cluster.

Amount enclosed: _____

Signature: _____

Make checks or money orders and mail reservations to:

THE GATEWAY CLUSTER
PO Box 583 Park Hills, MO 63601

Gateway Parking Coordinator: Cledith M Wakefield – 573-431-9246

Reservations will be accepted till
Wednesday, September 2, 2015

To check grooming assignment, go to:
http://www.heartlandkennelclub.org/reservations.htm