

SHADY OAKS CAMP AND RV PARK

Monthly Renter Information Sheet

960 HIGHWAY 206 E, HARRISON AR 72601 PHONE 870-743-2343

NAME _____ SIGNATURE _____

DATE _____

ADDRESS _____

PHONE _____

ALTERNATE PHONE _____

WORKPLACE _____

WORK NUMBER _____

ADDRESS _____

SUPERVISOR NAME _____

LENGTH OF TIME WORKED _____

SS# _____ DRIVERS LISCENSE # _____

STATE _____

PETS: LIST BREED AND AGE (MUST BE KEPT ON LEASH AT ALL TIMES AND CLEANED UP AFTER) _____

ALL RENTERS NAME: _____

PHONE _____

LAST RV RESIDENCE _____

PHONE _____

ADDRESS _____

DATES _____

CONTACT NAME AND NUMBER _____

DO YOU OWN YOUR CAMPER _____ ?

FINANCED THROUGH _____

NUMBER _____

ALL VEHICLES YEAR, MAKE, MODEL, PLATE

AT ANYTIME SHADY OAKS CAN CANCEL ANY AND ALL RENTAL AGREEMENT AT ANYTIME FOR ANY REASON. ALL RULES MUST BE FOLLOWED AT ALL TIMES.

I _____ HAVE READ ALL RULES AND AGREE TO ALL THE TERMS.
I KNOW THAT MY BILL WILL BE PAYED IN FULL ON _____ EACH MONTH.

NAME _____

SIGNATURE _____

SIGNATURE _____

DATE _____

REMINDER:

For your application to be considered you MUST submit a CLEAR picture of your RV and pictures of each renter's driver's license.