

# Town of Goshen, CT

## Camping Permit Application

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### Group Leader information

Name of Group Leader: \_\_\_\_\_

Mailing address: \_\_\_\_\_ Goshen, CT 06756

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Group Information

Name of Group (if applicable): \_\_\_\_\_

Number of campers under 18: \_\_\_\_\_

Number of adult supervisors: \_\_\_\_\_

Car registration: \_\_\_\_\_

### Area requested

Name or description of requested location: \_\_\_\_\_

Dates requested: \_\_\_\_\_

### Certification

I hereby certify that I accept responsibility for my group and that I will be present during the entire camping stay. My group will adhere to all applicable rules, including carrying out what we carry in, as well as any trash we find while camping.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Approval

Approved: \_\_\_\_\_ Date: \_\_\_\_\_