**TRACEN CAPE MAY CAMPING REGISTRATION FORM**

The application may be returned via one of the three methods listed below.

**Mail**: USCG Training Center **Fax**: (609)898-6884 **Email**: D05-SMB-TRACENCM-MWR@USCG.MIL

 ATTN: MWR Office

1 Munro Avenue

Cape May, NJ 08204

|  |  |
| --- | --- |
| CAMPER NAME (LAST, FIRST) | PHONE NUMBER |
|  |  |
| SPONSOR NAME (LAST, FIRST) | UNIT ASSIGNED |
|  |  |
| OTHER CAMPERS |
| 1. 6. |
| 2. 7. |
| 3. 8. |
| 4. 9. |
| 5. |
| MAKE OF VEHICLE | LICENSE PLATE (# AND STATE) |
|  |  |
| DATE CAMPING REQUESTED |
| FROM (CHECK-IN DATE):  | TO (CHECK-OUT DATE):  |

**I AM AWARE OF AND UNDERSTAND THE FOLLOWING:**

1. IF RESERVATIONS HAVE BEEN CONFIRMED AND I FAIL TO CHECK IN, THE CAMPSITE(S) MAY BE REASSIGNED AND I WILL BE CHARGED FOR THE DAYS THE SITE(S) WERE LEFT UNOCCUPIED.
2. I WILL CHECK-IN BETWEEN 1200 AND 1600 MONDAY THROUGH FRIDAY AND CHECK OUT BETWEEN 0800 AND 1100. ALTERNATE ARRANGEMENTS MAY BE POSSIBLE THROUGH CONTACTING THE MWR OFFICE AHEAD OF TIME.
3. I WILL KEEP ANY PETS OF MINE ON A LEASH AT ALL TIMES.
4. BEFORE HAVING A CAMPFIRE, I WILL GO TO THE FIREHOUSE AND RECEIVE A FIRE PERMIT. I WILL ABIDE BY THEIR RULES AND WILL FOLLOW PROPER FIRE SAFETY.
5. I HEREBY CERTIFY I HAVE READ THE RULES AND REGULATIONS AND AGREE WITH THE TERMS AND ACCEPT ITS CONDITIONS.

MEMBER’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIVACY ACT STATEMENT**

In accordance with 5 USC 552a(e)(3), the following information is provided to you when supplying personal information to the U. S. Coast Guard.

1. **AUTHORITY** which authorizes solicitation of the information: 10 USC 1475-1480. 10 USC 2771.

1. **PRINCIPAL PURPOSE(S)** for which information is intended to be used:
 (1) Collect proper identification of members requesting to use the TRACEN campground and for payment purposes.
 (2) Identify members who may owe funds to the TRACEN MWR fund for recoupment.
2. **ROUTINE USES** which may be made of the information:
(1) Recoup amounts owed to MWR after vacancy of campground.
3. **DISCLOSURE** of the information is voluntary, but failing to provide this information may result in non-assignment to the campground.

**CAMPGROUND REGISTRATION FORM ADDENDUM**

In consideration of the facilities provided, the user agrees and assigns by operation of law, or otherwise, to HOLD HARMLESS the United States, and to ASSUME FULL RESPONSIBILITY for and to defend, pay, or otherwise settle any and all claims, demands, actions, or causes of action of every nature and character whatsoever in law or equity of loss, damage or injury to any and all persons or property arising out of the operation or use of the Training Center campsite during or in connection with the time of stay at the TRACEN Cape May Campground.

FURTHERMORE, by my signature, I accept FULL responsibility for the property on the campsite and agree to fully reimburse the U.S. Coast Guard for any damages to said property. In addition, my liability for damages will be made within one month.

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SIGNATURE DATE