

## 2024 ACOA Campground Member Renewal

## **Member Information**

| Park Name  |          |                         |   |           |       |          |
|--|----------|-------------------------|---|-----------|-------|----------|
| Owner Name   |          |                         |   |           |       |          |
| Summer Address:Stree   | t Addres | S                       | City  | /         | State | ZIP Code |
| Winter Address:  |          |                         |   |           |       |          |
|  | t Addres | S                       |   | ity       | State | ZIP Code |
| Phone:   |          |                         | Fax:  |           |       |          |
| Email:   |          |                         | Website:  |           |       |          |
| Good Sam Rating*   |          | Pa                      | urk Open/Close Date   | s:        |       |          |
| Total RV Sites   | YES      | NO<br>How many          | ls your park o<br>Facebook?   | n         |       | lame:    |
| Tent sites available?  | YES      | NO<br>How many          | If yes, do you give permission<br>for ACOA to share your posts<br>_ on the ACOA Facebook page? <u>Please initial:</u> |           |       |          |
| Nightly cabin rentals?   | YES      | NO<br>How many          | Would you like to receive<br>your ARVC login to access<br>your ARVC member<br>benefits? YES / NO                      |           |       |          |
| тот  | AL OVE   | RNIGHT SITES            |   |           |       |          |
|  | A        | menities: Please circle | or underline applicabl  | e ameniti | es    |          |
| Cell phone rangeHiking TrailsSatellite TVGrocery StoHandicap accessibleFishing ChaPropaneFishing BaitPet FriendlyWi-FiShowersGasFishing ChartersDump Station |          |                         | ers Gift Shop   |           |       |          |
| Please provide a brief n   | arrative | about your park         |   |           |       |          |
|  |          |                         |   |           |       |          |
|  |          |                         |   |           |       |          |
|  |          |                         |   |           |       |          |

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| 2024 Dues                                |   |  |  |  |
|--|---|--|--|--|
| *lf y                                    | you have overnight rental sites, take the # of sitesx 1.00 = <u>\$</u><br>Park Fee Rate: <u>\$</u> 395.00 |  |  |  |
| Total Amount Due: \$                     |   |  |  |  |
| Thank you for supporting Alaska Tourism! |   |  |  |  |
|  | Payment Remittance  |  |  |  |

ACOA Membership Renewals may be made via check or credit card.

Checks may be addressed and mailed to:

ACOA PO Box 111005 Anchorage, AK 99511

If you would prefer to use a credit card please include your card number below, or give me a call at 907-351-3785 if you prefer to make a payment over the phone:

| Credit Card Number: | Exp: | CVV: |
|---------------------|------|------|
| _                   |      |      |

Billing Zip Code: Email or Phone Number to text Receipt

By signing I acknowledge that am allowing ACOA to charge my card for the amount above for the 2023 ACOA Membership Renewal.

| Signature: | Date: |  |
|------------|-------|--|
|            |       |  |