Bathroom Key(s) given:_____

_____

Date Key(s) given: _____

Signature of person receiving Key(s)

_____

Date Key(s) Returned:_____

Hampshire Park District
390 South Avenue
P.O. Box 953
Hampshire, IL 60140
847-683-2690
Fax: 847-683-1741

Hampshire Township Park District
Rackow Park
Primitive Campsites & Hines Supply Shelter
Reservation Form

Date of Event_____

Campsite # (circle all that apply) 1 2 3 4
(Campsite includes a picnic table and fire pit)

Campsite Reservation Date(s) From _____Until _____
Hines Supply Shelter Reservation Date(s) From _____Until _____

Name _____ Cell Phone_____
(Name of Individual/Group) Home Phone_____
Email Address_____

Address_____
Street City Zip

FEE SCHEDULE FOR	**RESIDENT**	**NON-RESIDENT**	**TOTAL**
Campsite(s)			
# of sites_____# of days_____x daily fee of	$10.00	$15.00	_____
Campsite Reservation Deposit (refundable)	$20.00	$20.00	_____
Hines Supply Shelter rental fee (includes fire pit)	$90.00	$105.00	_____
Shelter Reservation Deposit (refundable)	$65.00	$65.00	_____
Bathroom Key (refundable)	$100.00	$100.00	_____
		TOTAL FEES	_____

***50% DISCOUNT ON RENTAL FEES FOR NON-PROFIT ORGANIZATIONS THAT ARE WITHIN THE HAMPSHIRE TOWNSHIP BOUNDARIES**
A non-profit group is defined as a civic, charitable, religious or youth serving group within the Park District boundaries. Proof of 501(c)3 status to accompany this form.

There is no vehicle access to the primitive campsites or Hines Supply Shelter. A parking pass will be provided that must be displayed in the dashboard for the police department if you are parking in the lot overnight. All supplies brought in must be removed (including trash which can be placed in the dumpster on site) that you brought in. Reservation deposits are refunded after the key is returned (if rented) and the campsite is inspected.
*VEHICLE MAKE*_____*COLOR*_____*LICENSE PLATE #*_____

Payment in full, including deposit, is required when reservation is booked.
I/We the undersigned have received, are aware and will abide by the guidelines listed within the Hampshire Township Park District Agreement For Use of Facilities.

_____ _____
Signature of Applicant Date

Please contact Kim at 224-365-9354 if there is an emergency after regular business hours.