

AGE (check one)

I am 18 years of age or older.

I am under 18 years of age, and my parent/guardian has signed the Parental Permission Form (DPR 208C)

HEALTH (check one)

I know of no health limitations which may restrict my performance of assigned duties.

I do know of a health limitation which may Restrict my performance of assigned duties.

Why do you want to be a California State Park campground host? _____

How did you learn about our campground host program? _____

Availability:

Where would you prefer to be a host? Please indicate your top three choices by location and/or time period.

- 1) _____ Date: _____ through _____
- 2) _____ Date: _____ through _____
- 3) _____ Date: _____ through _____

Equipment and Pets:

camper _____ trailer _____ motor home _____

Size or length of equipment: _____ Will you have an additional vehicle? Yes _____ No _____

Will you have a pet with you? Yes _____ No _____ What kind? _____

(Current rabies vaccination certificate required; please bring a copy with you.)

Application References:

List three persons not related to you who know your qualifications.

Name	Address	Phone	Relationship
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

Signature: _____

Office use only

Contact date: _____ Date tentatively scheduled: _____

Action taken: _____

Park Scheduled: _____

Date: _____

Please send this application form to the appropriate State Park District office.