



MIFFLIN COUNTY SPORTSMEN'S ASSOCIATION

P. O. BOX 69
LEWISTOWN, PA 17044-2129
PHONE (717) 247-2640



CAMPING PERMIT

[Please Print Plainly](#)

Name of Member _____ Current membership no. _____

Address _____

Phone no. _____ DOB _____ E-mail _____

Vehicle license no. _____ Person Registered to _____

Signature _____ Check no. _____

By my signature I am assuming responsibility for myself and the others listed below.

[Others in your party](#)

Name _____ Current membership no. _____ Guest _____

Address _____

Phone no. _____ DOB _____ E-mails _____

Vehicle license no. _____ Person Registered to _____

Name _____ Current membership no _____ Guest _____

Address _____

Phone no _____ E-mail address _____

Vehicle license no. _____ Person Registered to _____

Name _____ Current membership no _____ Guest _____

Address _____

Phone no. _____ E-mail address _____

Vehicle license no _____ Person Registered to _____

Date (s) camping _____ Site # _____

Name of officer issuing permit _____ Signature _____