



LuWiSoMo Campground Reservation Request

Date Received: _____

Name: _____

Date Arriving: _____

Phone: _____ Cell: _____ Emergency Contact: _____

Date Leaving: _____

Address: _____ State: _____ Zip: _____

Type of Site	Days of Week	Number of nights	x Price per Night	= Cost per Site	x Number of Sites	= Site Sub-Total
Tent Site	Monday-Thursday		\$10.00			
Tent Site	Friday-Sunday		\$15.00			
Light Electric only	Monday-Thursday		\$25.00			
Light Electric only	Friday-Sunday		\$30.00			
30 amp Electric + Water	Monday-Thursday		\$30.00			
30 amp electric + Water	Friday-Sunday		\$35.00			
5-person Cabin	Monday-Thursday		\$50.00			
5-person Cabin	Friday-Sunday		\$55.00			
					TOTAL:	

Full payment is required in advance to guarantee your reservation.

Preferred Sites or Special Requests: _____

All sites are available on a first-come, first-serve basis. If no space is available, we will contact you by phone.

I am including payment by (check one): **Check** **Money Order** **Visa** **Mastercard**

If paying by credit card, please complete the following information:

Card Number: _____ Exp. Date: _____

Name as printed on card: _____

Billing Address: _____

Signature: _____ Security Code: _____

You may also make your credit card reservation by phone to Don Herried, (608) 372-5268.

Please mail your check or money order with this completed form to:

**LuWiSoMo Campground
W5421 Aspen Rd. Wild
Rose, WI 54984**