Goishi Coast Campground Usage Application Form

			Year	r Month	Day
Dear Goishi Coast Campground Management Team,					
Applicant Inform	nation				
Group	Name :				
Representative Name:					
Address:					
Phone Number :					
We will apply for the usage(change) of the Goishi Coast Campground as follows.					
Period		///(YYYY/MM/DD)	~/		nys andNights)
Site		Auto S	site (area) /	Free Site (t	ent(s))
Number of Guests		Junior High School and higher	Elementary School	Preschool and lower	Total
Sales / Rental					
Purpose		Camping /	Event / Others	()
Exemption		Full / P	artial : Reason	()
Price		yen	Details:	yen	al
			○ Sales / Renta	l Price :	yen
Permit Number	A- / F-		Other Information		
Note: • Please submit this form after reading and agreeing the "Terms and Condtions." • Information within the Bolded Box will be filled out by the employee.				Reciept	Reception