

### Registration Form – Cottages & Trailers

**APPLICATION MUST BE FILLED OUT COMPLETELY. PLEASE PRINT CLEARLY.**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Branch of Service \_\_\_\_\_ Rank \_\_\_\_\_ Unit \_\_\_\_\_

Military Status \_\_\_\_\_ VaARNG (Active) \_\_\_\_\_ VaANG (Active) \_\_\_\_\_ VaARNG (Retired) \_\_\_\_\_ VaANG (Retired)

Military Status- All Others (not VANG): \_\_\_\_\_ Active \_\_\_\_\_ Retired \_\_\_\_\_ Reserves \_\_\_\_\_ Other

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone #'s Cell \_\_\_\_\_ HM: \_\_\_\_\_ WK: \_\_\_\_\_

E-mail Address \_\_\_\_\_ Gender: M \_\_\_\_\_ F \_\_\_\_\_

#### Credit Card Information

Number \_\_\_\_\_ Type \_\_\_\_\_ Exp. Date \_\_\_\_\_ Auth # \_\_\_\_\_

\*\*\*\*Driver License # required \_\_\_\_\_\*\*\*\*

#### **DATES AND UNITS REQUESTED FOR RESERVATION BY PRIORITY (Please indicate dates and facility number for each choice)**

1<sup>ST</sup> CHOICE:

Unit : \_\_\_\_\_ Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

2<sup>nd</sup> CHOICE:

Unit : \_\_\_\_\_ Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

3<sup>rd</sup> CHOICE:

Unit : \_\_\_\_\_ Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

No. of Adults \_\_\_\_\_ No. Children \_\_\_\_\_

Request Sheets/Pillowcases \_\_\_\_\_ YES \_\_\_\_\_ NO. HOW MANY SETS \_\_\_\_\_ (\$6 per set)

#### Type of Orders

\_\_\_\_\_ ACT \_\_\_\_\_ OV/Official visitor  
\_\_\_\_\_ ATNG \_\_\_\_\_ TC/TDY civilian  
\_\_\_\_\_ ATRC \_\_\_\_\_ TM/TDY military  
\_\_\_\_\_ IDT \_\_\_\_\_ UV/Unofficial visitor

#### Reservation Type

\_\_\_\_\_ Call-in  
\_\_\_\_\_ E-mail  
\_\_\_\_\_ Online  
\_\_\_\_\_ Walk in

#### ID Type

\_\_\_\_\_ Driver's License  
\_\_\_\_\_ Military ID  
\_\_\_\_\_ Passport  
\_\_\_\_\_ State ID

Comments: \_\_\_\_\_

By signing this form, I acknowledge that I have read, understand, and agree to abide by the policies and procedures established for reservations on SMR and rental of any facility. I further acknowledge that failure to comply with these policies and procedures may result in my eviction from the lodging programs unit, forfeiture of all monies collected or owed, and disciplinary action through my chain of command.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### BELOW SECTION TO BE COMPLETED BY LOGGING OFFICE

Folio # \_\_\_\_\_ Reservation taken by: \_\_\_\_\_ Date: \_\_\_\_\_