

BLUE FALLS CAMPING RESERVATION FORM

91A Bowers Rd
Reading, PA 19605

Phone: 610-926-4017 fax 610-926-1824

www.bluefallsgrove.com

Name _____

Address _____

City, State & Zip _____

Home Phone _____

Alternate Daytime Phone _____

Unit License Number _____

Type of Site Desired Water/Electric _____
Tent Site (No Hook up) _____
Water, Electric & Dump Station (20-30 amp) _____
Water, Electric & Dump Station (50 amp) _____
Honey Wagon \$8.00 additional _____
Wood \$5.00 bundle & \$10.00 bundle _____
Air Conditioning \$5.00 additional _____

Please check you type of
Equipment Tent _____
Pop-Up _____
Truck Camper _____
Travel Trailer _____
Motor Home _____
Other _____
Length of your camping unit _____
Air Conditioning _____

Deposit Amount _____

Date of Arrival _____

Date of Departure _____

Check in time is 2:00PM and check out time is 2:00PM

Standard rate is for 2 adults and 2 children. There is an additional cost for additional adults and children.
Please see our brochure for rates.

Total number of Nights _____

Number of Adults _____

Number of Children (4-17) _____

Pets _____

Please tell us how you found Blue Falls _____

Please indicate any special needs or requests you may have _____