



9720 Oriole Dr
Coopersville, Michigan 49404
(616) 837-6323
www.conestogacampground.com

CAMPGROUND RESERVATIONS

Your Name: _____

Address: _____

City: State/Zip: _____

Home Phone: (____) ____ - _____ Work Phone: (____) ____ - _____

E-Mail Address: _____

Date of Arrival: _____ Date of Departure: _____

Total # of Nights: _____ Number of Adults: _____

Number of children: _____ Pets: (number of and type): _____

Type of camping equipment: *Class A Motor home, Class C Motor home, 5th Wheel, Travel Trailer, Truck Camper/Van, Tent Trailer, Tent*

Length of camping unit: _____ Number of Slide outs: _____

Please indicate any and all special requirements or preferences: Near restrooms, Near recreation, Premium river view w/ water & electric, Other: _____

Type of Site desired: Full hookup, Power & electric, Basic site

Will you be bringing a boat? Yes / No

Would you like to reserve a dock during your stay? Yes/ No

Would you be interested in watercraft rental? Pontoon___ Fish & Ski___ Jet Ski___ Hydro___

Have you stayed at our campground before?

Would you like: 30 or 50 Amp service?

Would you like to reserve: Camper cabin____, Park model____. Fold down/pop-up_____

How did you hear about us?: _____