



Camping Reservation Form
Fee is \$35/night

Name: _____

Check-In Date: _____

Check-Out Date: _____

Total Number of Nights: _____

Camper/RV Size: _____

Any Special Needs: _____

Please include your payment with this form and return to:

WHO Tractor Ride
Attn: Scot Knock
2141 Grand Avenue
Des Moines, IA 50312