



2017 Annual Pass Registration Form

Office use only:
 Vehicle #: _____
 Splash Pad #: _____

Full Name: _____

Address: _____ City: _____ Zip _____

Phone Number: _____ D.O.B. _____

Email: _____

Drivers License #: _____

License Plate #: _____

Additional Family Members To Be Listed on Account (include D.O.B.) _____

Please indicate number of annual passes you are purchasing:

***Vehicle Park Passes:**

- _____ Resident Vehicle Park Pass \$25
- _____ Resident Senior Vehicle Park Pass \$20
- _____ Resident Additional Vehicle Park Pass \$10
- _____ Non-Resident Vehicle Park Pass \$35
- _____ Non-Resident Senior Vehicle Park Pass \$30
- _____ Non-Resident Addt'l Vehicle Park Pass \$20

Splash Pad Passes:

- _____ Resident Splash Pad Pass \$15
- _____ Non-Resident Splash Pad Pass \$25

***Family Passes: (Includes 1 Vehicle Park Passes and 4 Splash Pad Passes)**

- _____ Resident Family Pass \$80
- _____ Non-Resident Family Pass \$130

(*Select Events Held At Lake Callis May Require Additional Fees And May Not Be Included With An Annual Pass.)

Make checks payable to: Davison Township	Amount Due: \$ _____
Mail or drop off forms to: Lake Callis Recreation Complex 1152 N. Gale Rd Davison, MI 48423	Date Paid: _____ Employee Initial: _____
	Cash: _____ Check # _____ Credit: _____
Passes can be picked up at the Lake Callis Office. 9 - 12 & 1 - 5 M-F.	