

HARRIMAN GROUP CAMPS
ROAD PERMIT APPLICATION

NAME: _____ NAME OF ORGANIZATION: _____

ORGANIZATION ADDRESS: _____ / _____ / _____ / _____
Street city state zip

PHONE: _____ FAX: _____

PURPOSE/EVENT: _____

VEHICLE INFORMATION:

YEAR: _____ MAKE: _____ MODEL: _____ COLOR: _____

PLATE #: _____ STATE: _____

TRAILER INFORMATION:

YEAR: _____ MAKE: _____ MODEL: _____ COLOR: _____

PLATE #: _____ STATE: _____

TRAVELING ON: (check one and specify destination area)

- Palisades Interstate Parkway from Exit 15 to Exit 16 (Lake Welch Dr.) to _____.
(specify destination area)
- Palisades Interstate Parkway from Bear Mountain Bridge to Exit 18 (Seven Lakes Dr.) to _____.
(specify destination area)
- Seven Lakes Drive from Sloatsburg to _____.
(specify destination area)
- Route 6 (Long Mountain Parkway) to Seven Lakes Dr. south to _____.
(specify destination area)

ARRIVAL DATE: _____ TIME ON ROAD(S) COMING: between _____ am _____ am
_____ pm and _____ pm

DEPARTURE DATE: _____ TIME ON ROAD(S) GOING: between _____ am _____ am
_____ pm and _____ pm

THE RETURN ROUTE WILL BE THE REVERSE OF THE ABOVE

Mail or Email application to: Group Camp Office
Palisades Interstate Park Commission
PO Box 427 Administration Building
Bear Mountain, NY 10911
Phone: (845) 429-2967
Email: GroupCamps@parks.ny.gov

Incomplete or illegible applications will result in delays in processing.