Division of Parks and Outdoor Recreation

Alaska Department of Natural Resources

ALASKA STATE PARKS
CABIN PERMIT APPLICATION

Name _____

Address _____

City _____State_____ Zip Code_____

E-mail _____

Day Phone _____ Evening Phone _____

First Name of Guests _____

Number of Adults _____ Number of Children _____

Cabin Requested _____

Dates Requested _____ Number of Nights _____

Alternate Cabin _____

Alternate Dates _____

If using a Park's Cabin Credit what is the number? _____

Credit Card Information:

Amount to Charge $_____ Visa ___ MasterCard ___ Expiration Date _____ V-Code _____

Credit Card Number _____

Name as it appears on card _____

Credit Card Statement Mailing Address if different from mailing address above: _____

_____

I have read the cabin information and understand I will be using a ***rustic*** *and possible* ***remote cabin*** *without road access. I agree to leave the cabin clean and orderly, and will be responsible for any damages to the cabin, associated facilities, or park resources caused by me or members of my party. I am aware of the normal dangers and hazards associated with backcountry travel in Alaska. Name and address information is considered public records and as such, is available to the public.*

Signature _____ Date _____

FAX COMPLETED APPLICATION TO 907-269-8901