



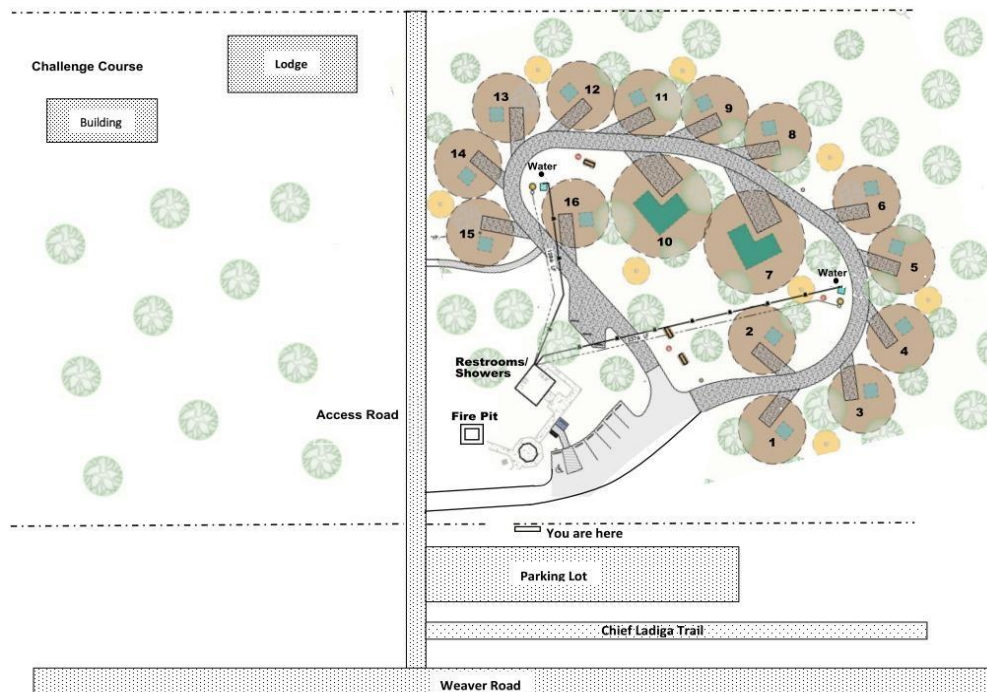
**Michael Tucker Park Campground
Reservation Packet**

City of Anniston
Parks & Recreation Department
P.O. Box 2168
Anniston, AL 36202

Campground Rules

1. Sites rent for \$25.00 per night and are filled by reservation only. Call (256) 847-7349 to make reservations.
2. Payment must be made before reservation is confirmed.
3. Check-in time is 2:00 p.m. and checkout time is 12:00 p.m.
4. Each site will accommodate 1 vehicle/RV and 2 tents or 4 tents.
5. One vehicle is allowed at each site. Additional vehicles may be parked at the CLT trailhead parking lot located on the east side (entrance) of campground as space is available.
6. All garbage should be placed in designated containers located throughout the campground.
7. Lanterns should be kept on designated poles located throughout the campground.
8. Pets must be kept on leashes at all times. Owners are responsible for picking up waste produced by their pet.
9. Alcoholic beverages are prohibited in the campground and adjoining park facilities.
10. Volume levels of radios, CD players, musical instruments, and other sound producing devices should be kept at a minimum in order to ensure a pleasant environment for those using the campground.
11. Water is available at 2 facets located within the campground.
12. Restroom facilities with showers are available near park entrance.
13. Entrance gate will close from 10:00 p.m. to 7:00 a.m. Quiet time will be observed during these hours.
14. Campfires must be confined to designated fire pits located throughout the campground. Fires should be monitored at all times and put out before leaving the premises.
15. The campground does not provide dumping stations.
16. In the event of emergencies, call 911, the Anniston Police Department at (256) 238-1800, or the Weaver Police Department at (256) 820-0530. The campground address is 6514 Weaver Road.

Campground Map





Michael Tucker Park Campground Reservation Form

Contact Information

Name _____ Group Name _____

Address _____ City _____ State _____ Zip Code _____

Phone _____ Email Address _____

Camping Information

Arrival Date _____ Departure Date _____

Number of People in Group _____ Will you bring pets? Yes ___ No ___ Type of pet(s) _____

Camping Equipment (check all that apply):

- Tent - Number of tents _____ (maximum of 4 allowed)
- Camper trailer with towing vehicle
- RV

Number of vehicles that will accompany your group (excluding towing vehicle) _____

Preferred Site Number _____ Alternate Site Number _____ (refer to enclosed/attached map)

Do you mind staff assigning you a site if your preferred and alternate sites are unavailable? Yes ___ No ___

Reservation Instructions

This form must be completed and returned along with a \$25.00 deposit in order for your reservation to be confirmed. The form may be mailed, emailed, or delivered in person to the Anniston Aquatics & Fitness Center. Payments may be made through the mail, in person, or over the phone using a credit/debit card. Remaining balances should be paid at the center on the date of your reservation before entering the campground. Contact information for the Anniston Aquatic & Fitness Center is:

Mailing address: P.O. Box 2168, Anniston, AL 36202

Physical address: 130 Summerall Gate Road, Anniston, AL 36205

Email: rbrothers@anniston.al.gov

Phone: (256) 847-7349

Verification

Please sign and date to verify that all the information that you have provided is accurate and that you have read and understand the rental rates, the reservation instructions, and the campground rules. Furthermore, by signing you agree to be responsible for any losses, damages, or injuries to property owned by the City of Anniston as a result of you or your group's stay at the Michael Tucker Park Campground. In addition, you understand that the City of Anniston will not be liable for bodily injury or responsible for the damage or theft of you or your group's personal property while staying at the campground.

Print Name _____ Signature _____

Date _____

PARKS & RECREATION DEPARTMENT USE ONLY

Campsite Number _____ Number of Nights _____

Amount of Deposit _____ Payment Method _____ (include check number if applicable)

Balance Due _____

Reservation Approved? Yes _____ No _____ If no, list reason _____

Name of staff authorizing reservation:

Print _____ Signature _____

Date _____