2020 SEASONAL CAMPSITE SELECTION MEETING DESIGNATION OF AUTHORIZED REPRESENTATIVE CRAWLING VALLEY CAMPGROUND

To: Crawling Valley Recreation Society

I,	
	(Name of Seasonal campsite applicant)
of	
0	(Seasonal campsite applicant's address)
Hereby authorize	
·	(Name of authorized representative)
Of	
	(Authorized representative's address)
	esentative for purposes of attending and acting in my place at the campsite selection meeting to be held at
I agree to be bound by any above-mentioned campsite	y selection, action or decision made by my authorized representative at the
above-mentioned campsit	selection meeting.
(Signature of witness)	(Signature of campsite applicant)
·	
	(Date)