CAMPER'S HOLIDAY ASSOCIATION BUYER'S APPLICATION

The undersigned submit this application to acquire of The undersigned state that the following information		
The undersigned state that the following information	ir is true and correct to the	best of our knowledge.
NAME(S) OF NEW OWNER(S): (Copy of driver's Florida)	s license required for 55+	Certification with State of
ADDRESS, if other than Camper's Holiday		
TELEPHONE NUMBER(S)		
CERTIFICATION: I certify that I have received a contain have read, understand and agree to abide by the rule		_
Signature of Buyer Date		_
Signature of Buyer Date		
CHARACTER WITNESS:		
Name_	Phone#	
Address		

No sales will be approved before completion of this form as per the "By-Laws" and "The Handbook of Rules And Regulations"