

Scout Lake Access Permit

Name:	Address:		
Phone:	Drivers License:	License Plate:	
Vehicle Make/Model/Year/C	olor		
Car Insurance company/Police	sy #:		
Number of Persons in your P	arty		
Key #:Ke	ey Deposit (\$20) □check □cash		
Date Permit Issued:	Date Permit Expires:	Date Key Returned:	
I have read, understand and agree to the Rules and Regulations and will release and hold harmless Evenson Timberland Agency, Inc., Evenson Logging Company, and the City of Clatskanie, from any and all injury or damage however slight and will defend same from all claims resulting while traveling on private land to or from Scout Lake. I understand I may be prosecuted or issued citation under applicable laws should I violate these requirements. Violation of any Rules and Regulations may result in the forfeiture of any and all deposits.			
Other Conditions for Use:			
Signature of Applicant:			
City Approval by:			