

End of Season Departure Form

(Complete and return to DBR Office)

RV Member Name(s) _____ Site(s) # _____

Approximate Date of Departure:	Approximate Return Date:
Name of Contact Person(s) for your Site (This person will have your authority to handle issues or emergencies that might arise in your house or on your Site during your absence.)	
Does your contact person have keys to your house/shed/accessory room? (We recommend that someone other than the office have your keys since it is not always open and staff may not be available.) ☐ Yes ☐ No	
Does the office have keys to your house? ☐ Yes ☐ No	
Is there any information about your Site that would be beneficial for Facilities Staff to be aware of?	