

Rustic Accessible Cabin Campsite Reservation Request

Form 2500-108 (R 01/2025)

| Leave Blank – DNR Use Only | |
|----------------------------|----------------|
| Clerk | Date Received |
| Date | Time Received |
| Refund Number | |
| Check Number | Date |
| Check In Date | Check out Date |

FOR USE EXCLUSIVELY BY PEOPLE WHOSE PHYSICAL DISABILITY MAKES USE OF TRADITIONAL CAMPING FACILITIES VERY DIFFICULT OR UNLIKELY.

First day to **accept** Reservation Applications: January 10.
Not accepted if postmarked or delivered before January 10.

Only one reservation will be accepted per application.
Additional requests will require separate forms.

Notice: Use of this form is required to reserve a rustic accessible cabin under s. NR 45.10, Wis. Adm. Code. Complete and send form to campground. Personally identifiable information on this form will be used to administer the parks and forest program, may be used for law enforcement purposes and is available to requesters under Wisconsin's Public Records law [ss. 19.31-19.39, Wis. Stats.].

| | | | | | |
|-----------------------------------|--|------|-------|--------------------------------------|-------|
| Name of Camper: (Last, First, MI) | | | | Telephone Number (Include Area Code) | |
| Address | | City | State | ZIP Code | Email |

Name of Disabled Camper (Must be completed)

| | | | |
|-----------------|---------------------------|-----------------|---------------------------|
| Vehicle #1 Make | Vehicle #1 License Number | Vehicle #2 Make | Vehicle #2 License Number |
|-----------------|---------------------------|-----------------|---------------------------|

Cabin Desired: Blue Mound Copper Falls **MAXIMUM Request On This Form - Seven (7) Consecutive Nights.**
 Reserve Cabin beginning at **3:00 PM** on reservation day. **CHECK-OUT TIME is NOON** on the last day of the reservation.

| | | |
|------------|---|--|
| 1st Choice | Reservation Day (MM/DD) | I plan to stay ____ nights. If the number of nights planned is not possible i will accept a minimum of ____ nights. |
| | Reservation Day (MM/DD) | I plan to stay ____ nights. If the number of nights planned is not possible i will accept a minimum of ____ nights. |
| 3rd Choice | If the above choices are not possible, I will accept any ____ night(s) between (MM/DD) _____ and (MM/DD) _____ <input type="radio"/> Weekends only <input type="radio"/> Any night(s) available | |

NOTE: Only one camping party per reservation. The cabin will accommodate four (4) people. One (1) tent, not exceeding 8 x 8, may be on site. No wheeled camping units. Maximum of six (6) people per stay.

If nonfamily group, list names of others in party; for emergency purposes only:

| | |
|--------|--------|
| Name 1 | Name 3 |
| Name 2 | Name 4 |

| Item | Description | Quantity | Unit Price | Amount | Leave Blank - DNR Use |
|------------------------|--|----------|------------|--------|-----------------------|
| CAMPING FEE | Number of Nights | | \$20.00 | | |
| RESERVATION FEE | (Non-refundable) | 1 | \$7.95 | \$7.95 | |
| TOTAL | Attach a check or money order payable to: Department of Natural Resources for the TOTAL Amount. | | | | |

METHOD OF PAYMENT - **DO NOT SEND CASH**

- My Check/Money Order is enclosed: Payable to the Department of Natural Resources
- Call me at the following daytime phone number so that I may pay over the phone by credit/debit card _____.

I, the undersigned, have read the reservation conditions and agree to be responsible for the behavior of the camping party and to pay for damages or charges for undue cleanup incurred by the Department. I certify that to the best of my knowledge, the above information is true and that a member of the camping party has a disability which makes the use of traditional campsites difficult.

| | |
|-----------|----------------|
| Signature | Signature Date |
|-----------|----------------|

Rustic Accessible Cabin Campsite Reservation Request

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Two rustic cabin campsites are available. One at **Copper Falls State Park** and one at **Blue Mound State Park**. The Rustic Accessible Cabins are for people with disabilities. Priority will be given to those least likely to use traditional camping facilities.

- The Rustic Accessible Cabin campsite (approximately 13' x 13') is designed to be **Wheelchair Accessible** and to accommodate up to 4 people.
- Only one tent, not exceeding 8' x 8', is allowed on the Rustic Accessible Cabin campsite.
- Maximum occupancy of 6 people between Rustic Accessible Cabin and the tent allowed at the campsite.
- RVs are not allowed on the Rustic Accessible Cabin campsite.
- The Rustic Accessible Cabin has one average sized bed combination and one adult sized double bed (with **thin** mattress pad).
- The Rustic Accessible Cabin has at least two electrical outlets and electric lighting inside cabin. Space heaters are not allowed in the cabin.
- Cooking is only allowed outdoors on an accessible fire ring. Firewood may be purchased at the park. A picnic table outside of cabin is provided.
- The Rustic Accessible Cabin is a non-smoking facility per state law.
- No pets are allowed **except certified service animals**. (State law prohibits pets in state buildings.)
- Flush toilets and shower are near the campsite.
- Campers are responsible for removing all trash and recycling from the cabin. Dumpsters are available at the park.

Reservation Applications are Subject to the Following Conditions:

- There is a **\$7.95 reservation fee** and a cost of **\$20.00 per night for the Rustic Accessible Cabin campsite**.
- Mail or deliver your completed reservation form to:

Available May 26 to October 2

Copper Falls State Park
36764 Copper Falls Road
Mellen, WI 54546

Available May 27 to October 16

Blue Mound State Park
4350 Mounds Park Rd.
Blue Mounds, WI 53517

Make sure the envelope is marked Rustic Accessible Cabin Reservation.

- Telephone reservations for the Rustic Accessible Cabin campsite will only be accepted June 1 to August 31, Monday-Friday, 9 a.m. - 4 p.m.

Copper Falls State Park (715) 274-5123

Blue Mound State Park (608) 437-5711

What you need to bring: Food and drinks, cooking and eating utensils (**dishes are not provided**), air mattress or foam sleeping pads, sheets/blankets/pillows/sleeping bags, towels and wash cloths, personal hygiene items, extension cords, lawn chairs, and a cell phone if you have one (cell coverage is limited at Copper Falls State Park).

Check in time: Check in time for the Rustic Cabin is **3:00 p.m.** Check out time is **NOON** on the last day of the reservation period.

Refund Conditions: Cancellation requests may be made in person, by telephone, or by mail. Make requests **directly to the property** where the reservation has been confirmed.

Full Refund: A full refund of all payments **except the \$7.95 reservation fee** will be made if the cancellation request is received at the park office at least fourteen (14) days before the cabin is to be occupied.

Partial Refund: A refund of all payments **except the \$7.95 reservation fee and one (1) night's cabin fee** will be made for cancellation requests received less than fourteen (14) days before the cabin was to be initially occupied. No refunds once the cabin has been occupied.

1. A Vehicle Admission Sticker is required on all motor vehicles using a state park and must be purchased on or before entry into the park. A maximum of two vehicles may be parked at the Rustic Accessible Cabin campsite. (Prices are subject to change.)

Vehicle Admission Stickers:

| | | | | | |
|-------------------|---------|------------------------|---------|--------------------|---------|
| Resident Annual | \$28.00 | Resident Senior Annual | \$13.00 | Nonresident Annual | \$38.00 |
| Resident Daily | \$13.00 | Resident Senior Daily | \$3.00 | Nonresident Daily | \$16.00 |
| (Age 65 or Older) | | | | | |

2. Disabled applicants must identify themselves (or one of their camping party) on the reverse side of this application.
3. Only one reservation period will be confirmed per application. Each application must be accompanied by full payment of the camping fee plus the \$7.95 reservation fee.