

DEPARTMENT TOWN HALL – 110 MYRTLE AVENUE WESTPORT, CT 06880

P 203.341.1170 F 203.341.1088

COCKENOE ISLAND CAMPING PERMIT 2024 SEASON

CAMPSITE:	#1	#2	#3	#4
NAME OF APPL	ICANT:			
ADDRESS:				
TOWN/CITY/ST	ATE:			
PHONE NUMBE	R:			
E-MAIL:				
DATES: One Reservation		i	# OF NIGHTS (Maximul	m of 2)
NAMES OF THO	SE OCCUPYING	CAMPSITE: (Limit of	5 people per campsite)	
1)				
2)				
3)				
, ,			HT OF OR IT SHALL BE FO MPSITES MUST BE VACA	RFEITED, AND CAN BE TED BY 12 NOON THE DAY AFTER.
FEE IS \$20.00 PE	R NIGHT AND IS NO	ON-REFUNDABLE. RAI	N DATES WILL NOT BE IS	SUED.
NO DODS ALLOW	/ED ON THE ISLAN	D.		
OVERNIGHT PAR AREA.	KING AND LAUNCH	HING OF BOATS IS PRO	OHIBITED AT THE SAUGA	TUCK SHORES CANAL PARKING

YOU MUST BRING THIS PERMIT WITH YOU SO THAT IT MAY BE PRESENTED UPON REQUEST. IF YOU NEED ASSISTANCE, CALL THE WESTPORT POLICE DEPARTMENT AT 203.341.6000.

TO STATE LAW (MARINE POLICE WILL CHECK).

**PLEASE REMEMBER THAT COCKENOE ISLAND HAS A CARRY IN/CARRY OUT POLICY. PLEASE TAKE YOUR TRASH WITH YOU. THERE IS NO TRASH PICK-UP ON THE ISLAND.

OVERNIGHT PARKING IS PERMITTED AT THE STATE BOAT RAMP. PORTABLE LATRINES ARE REQUIRED PURSUANT

The Town of Westport is not responsible for injuries or damage incurred by campers or their guests while on Cockenoe Island. By applying for and accepting this permit, the holders and guest recognize that conditions in camping and along shorefront areas may contain hazards such as holes, uneven ground, and drop-offs indigenous to natural environments. By camping within Westport's jurisdictional boundary, the holder and guests agree to assume all risks and liabilities inherent in this activity, including, but not exclusively, those flowing from natural and manmade hazards of Westport's coastal and camping areas. By accepting this permit, the holder and guests acknowledge the existence of such hazards and dangers and agree that the Town of Westport is not responsible for any damage or injury incurred while camping within Westport's jurisdiction.

I have read the above, understand its contents, and agree to abide by its liability waiver.

Further, I have received a copy of the Cockenoe Island ordinance and agree to abide by the conditions set forth in said ordinance.

	SIGNATURE OF APPLICANT	DATE
APPROVED:	CONSERVATION DEPARTMENT OFFICIAL	DATE
ALLINOVED.	CONSERVATION DELAKTMENT OLLICIAL	

NOT VALID UNLESS SIGNED BY APPLICANT
AND APPROVED BY
CONSERVATION DEPARTMENT- TOWN OF WESTPORT, CT