



Capitol Reef National Park

Commercial Use Authorization Permits



To make a payment, complete this form. This is NOT an application. Applicants must contact 435-425-4130 or go to www.nps.gov/care for additional information.

*Required Information is marked by an asterisk **

* Commercial Use Authorization Permit #: IMR-CARE-5300-

* Business Name:

Contact Information

* First Name: * Last Name:

* Address:

* City: * State: * Zip:

* Country:

* Telephone: * Email:

Select Permit(s) to Pay For: (Verify Selection Before Payment)

Application Fee \$100.00 (Non-Refundable)

Permit Processing Fee \$100.00

Comments:

Total Payment Amount: