



GEOCACHE IDENTIFICATION FORM

RESPONSIBLE PARTY'S contact information:

Name: _____

Address: _____

City, State and Zip Code: _____

Telephone: (home) _____ (work) _____

E-mail address: _____

The RESPONSIBLE PARTY desires to place a geocache at the following location(s) in
_____ State Park/State Forest

Type of Cache: Traditional Multi-cache Letterbox Virtual
 Event/CITO Mystery Webcam Other _____

CACHE NAME (required): _____

CACHE LOCATION: (use the final site if multi-cache):

LATITUDE: _____

LONGITUDE: _____ COUNTY: _____

CACHE CONTAINER DESCRIPTION: (size, color, container description)

GEOCACHE WEBSITE ADDRESS: _____

ADDITIONAL INSTRUCTIONS (if needed):

IF MULTICACHE, LIST ADDITIONAL SITE(S):

CACHE NAME (required): _____

CACHE LOCATION: (use the final site if multi-cache):

LATITUDE: _____

LONGITUDE: _____ COUNTY: _____

CACHE CONTAINER DESCRIPTION: (size, color, container description)

GEOCACHE WEBSITE ADDRESS: _____

ADDITIONAL INSTRUCTIONS (if needed):

