

**U.S. Dept. of Interior Fish & Wildlife Service—St. Marks National Wildlife Refuge
FLORIDA NATIONAL SCENIC TRAIL OVERNIGHT USE PERMIT
VISITOR MUST HAVE THIS PERMIT DURING VISIT**

**Refuge Contact—Daytime—850/925-6121 After Hours—850/251-8525 or 850/251-8523
Or 850/210-6405 Wakulla Co. Sheriff 850/926-0800**

Name: _____ **Location of Entry (check one)** Medart Aucilla

Address: _____ **Location of Exit (check one)** Medart Aucilla

City _____ **State** _____ **Zip** _____ **Date** _____ **Campsite Name/#**

Vehicle tag # _____ **State** _____ **1.** _____

No. in group _____ **Fee Paid \$** _____ **2.** _____

Start Date (mo./day/year) _____ **3.** _____

Finish Date (mo./day/year) _____ **4.** _____

Emergency Contact/phone no: _____ **5.** _____

_____ **6.** _____

Hiker cell phone: _____ **Hiker's Signature/Date:** _____

Refuge Staff Signature/Date _____

Please complete entire permit, including signatures and attach receipt of payment. Hiker will display permit on dash of vehicle and keep one copy on hand during hike. Staff will place copy in LE box and current hiker folder and send email to all St. Marks staff.