



## **RV PARK RESERVATION FORM**

Specific Site Locations Cannot Be Guaranteed and Are Finalized Upon Arrival; Campers Will Be Located at The Discretion of The Campground Hosts.

## PLEASE REVIEW THE RULES & REGULATIONS BEFORE COMPLETING THE FORM

CASH, CHECK & CREDIT CARDS ACCEPTED; M/C-VISA. TOTAL AMOUNT DUE AT RESERVATION

The Daily Rate does not include taxes. Taxes include occupation (2%), sales (7.5%) & lodging (5%).

All completed forms may be submitted to kirwin@statefair.org or mailed to PO Box 1387, Grand Island, NE 68802

EVENT ATTENDING:							
PERSONAL INFORMATION:							
Last Name:			First Name:				
Company:							
Address:							
City:					Zip:		
Phone:		C	ell:				
E-Mail:							
Reservation #1							
Date of Arrival:		Da	Date of Departure:				
Reservation #2 (If App	olicable)						
Date of Arrival:		Da	Date of Departure:				
SERVICE INFORMATION:							
Type of unit: Motorhome	Bumper Pull	Fifth Wheel	Toterhome	Other			
Length of Unit:	_ Electric Needs:	30 Amp	50 Amp <b>Do You</b>	Travel With Pets?	Yes	No	
lumber of Units: Total Nu			Number of Nights:				
Special Requests or Needs:							
PAYMENT INFORMATION: C	ash, Check & Credit Ca	ards Accepted; <b>M/</b> 0	C-Visa				
Credit Card #:			Expiration Date:				
Name on Card:							
		Please Indicate if Paying by Check/Cash Here:					
Signature:		Dat	Date:				

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