

CAMPER REGISTRATION FORM

Chaperons must be at least 21 years of age by January 1st of the Fair year to register a camper with the Fair. No chaperon will be responsible for more than 10 youth exhibitors. There must be an adult staying in each camper. Chaperons are responsible for the actions of all persons staying in the camper.

I am 21 years of age or older and I will have a camper parked at the Fond du Lac County Fairgrounds from July 21 to July 25, 2010.

I agree to act in a respectable and responsible manner and abide by the Fond du Lac Agricultural Society Code of Ethics. I understand that if any disciplinary problems occur, the Fair Disciplinary Action Guidelines will be enforced. I will follow all rules and regulations set forth by the Fond du Lac County Agricultural Society, the Superintendents, the Adult Supervisors, and the Sheriff's Department. Quiet time will be from 12:00 midnight until 5:00 a.m.

All camper trailers must pay a registration fee of \$50.00 (\$100.00 if you need a 210 hook up) for their stay at the Fond du Lac County Fair. This fee is to cover the cost of electricity and maintenance of the area.

Camping location will be determined by a lottery. No spaces will be reserved. Each camper unit will receive a lottery number upon registration. When you bring your camper in, you will receive a card with the lottery number on – to be displayed on the camper in the window of your camper. This policy will be enforced! Please NO campers before Noon on Monday, July 19, 2010.

The Fond du Lac County Agricultural Society and its members are not responsible for lost items or damages that may occur during the stay of the camper at the fairgrounds.

Chaperon Name: _____

Age: _____

Address: _____

Phone Number: _____ Emergency Number: _____

Type of Camper: _____

Length: _____ Power
needed? Yes No

Chaperon Signature: _____

List all persons staying in the Camper: _____

**EVERYONE STAYING ON THE GROUNDS OVER NIGHT MUST BE LISTED ON
THIS FORM REGARDLESS OF AGE.**

OFFICE USE ONLY

CAMPER NUMBER: _____

METHOD PAID:

NUMBER OF OCCUPANTS: _____

CASH

DATE PAID: _____

CHECK,

NUMBER: _____

OFFICE PERSONAL SIGNATURE _____
