



## **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 jlech@statefair.org or mailed to PO Box 1387, Grand Island, NE 68802 PERSONAL INFORMATION:

Last Name:	First Name:					
Company:						
Addross						
City:	State:		2	Zip:		
Phone:	Cell:					
F-Mail <sup>.</sup>						
Reservation #1						
Date of Arrival:	- Date of Departure:					
Reservation #2 (If App	licable)					
Date of Arrival:	– Date of Departure:					
SERVICE INFORMATION:						
Type of unit: Motorhome	Bumper Pull	Fifth Wheel	Toterhome	Other		
Length of Unit:	Electric Needs:	30 Amp	50 Amp Do You	Travel With Pets?	Yes	No
Number of Units:	Total N	Total Number of Nights:				
Special Requests or Needs:						
PAYMENT INFORMATION: C	ash, Check & Credit Ca	ards Accepted; M/	C-Visa			
Credit Card #:	Exp	Expiration Date:				
Name on Card:						
Last 3 Digits on the back of the c	Ple	Please Indicate if Paying by Check/Cash Here:				
Signature:		Date:				

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