



CAMPSITE RESERVATION APPLICATION WALWORTH COUNTY FAIR

September 1, 2021 – September 6, 2021

PO Box 286 - 411 East Court Street - Elkhorn, Wisconsin 53121-0286 Tel.: (262) 723-3228 E-mail: office@walworthcountyfair.com

RETURNING CAMPERS COMPLETED APPLICATION & FULL PAYMENT DUE by:
JULY 1, 2021, 5:00 PM CST, at the WALWORTH COUNTY FAIR OFFICE at address listed above.
Don't Delay – Fill Out Today!

Please note:

All guest visiting and/or staying at the campgrounds must purchase a 2021 Walworth County Fair Season Pass or be a valid Walworth County Agricultural Society, Inc. Lifetime Member. Non-purchase of a season pass or lifetime membership will result in loss of your campsite. Incorrect or incomplete applications and/or non-payment will not be processed & returned.

Applicant:

_____ I am a Returning Camper – Site # _____

_____ I am a New Camper

Type of Campsite Guest:

- _____ Fair Guest
- _____ Fair Vendor
- _____ Fair Exhibitor (4-H, FFA, Open Class)
- _____ Fair Superintendent/Staff/Volunteer/Official

NAME OF ADULT RESPONSIBLE FOR SITE: (Please Print Clearly)

MAILING ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE: (DAYTIME) (_____) _____ **(CELL)**(_____) _____

E-MAIL ADDRESS _____

EMERGENCY CONTACT (not camping with you):

Name: _____

Emergency Contact Number: (_____) _____

ARRIVAL DATE:

Will you have a pet? Yes / No

Please Note: Campsites are rented only to people over 18 years of age. Minors are prohibited from staying overnight at a campsite without an adult present.

*** IMPORTANT!*** Please list below the names & addresses of **ALL** persons staying at your campsite.

Please indicate if they are a Lifetime Member. INFORMATION REQUIRED IN THE EVENT OF AN EMERGENCY:

<u>NAME</u>	<u>ADDRESS</u>	<u>LIFETIME, GUEST, VENDOR, EXIBITOR, STAFF/VOLUNTEER</u>
_____	_____	L / G / V / E / S
_____	_____	L / G / V / E / S
_____	_____	L / G / V / E / S
_____	_____	L / G / V / E / S
_____	_____	L / G / V / E / S

For additional persons, please attach sheet with needed information.

Indicate Type of Camping Unit:

- () Travel Trailer – Side Out: Yes / No
- () Motor Home -- Slide Out: Yes / No
- () Tent
- () Camper
- () Pickup Camper
- () Other (Indicate): _____

Camping Unit Width: _____ Ft

(Entire unit, including slide outs, MUST fit within 20 ft. lot width)

Electrical Hook Up Requested: Yes / No

VEHICLE INFORMATION:

Number of Vehicles: _____

Make: _____

Model: _____

License Plate Number: _____

State: _____

Make: _____

Model: _____

License Plate Number: _____

State: _____

FEES:

All camp guests (except children Age 4 & under) shall have their 2021 Walworth County Fair Season Pass or valid Walworth County Agricultural Society, Inc. Lifetime Membership card with them at all times.

INDICATE:

_____	Campsite Basic Fee (Includes 5 nights and 2 parking passes)	= \$200.00
_____	Additional \$40.00/night site fee for Early Birds staying prior to 9/1/21	= _____
_____	Adult Season Pass _____ Number of Passes @ \$30/each (until 8/6/21)	= _____
All Campers must have a Season Pass or be a current Lifetime Member		
_____	Junior Season Pass (Age 5-12 Yr.) _____ Number of Passes @ \$15/ea.	= _____
_____	Lifetime Membership Pass _____ Number of Passes @ \$400/ea.	= _____
_____	Other – Indicate _____	= _____

TOTAL PAID BY CASH, CHECK OR CREDIT CARD

\$ _____

Fill in credit card information or enclose check payable to: WALWORTH COUNTY FAIR

Credit Card # _____ - _____ - _____ - _____

Expiration Date: _____ Security Code on Back: _____

Print Cardholder's name: _____

() MasterCard () Visa () Discover () American Express

Note:

- * Information packet, including season passes and parking passes will be given to you at check-in/arrival at the Walworth County Fair Registration Campsite.
- * There is a NSF Charge of \$40.00 per Check.
- * Camping Refund Policy: Must be made in writing & received prior to August 15, 2021. A non-refundable fee of \$10 will be charged. No refunds after August 15, 2021.

SPECIAL REQUESTS:

* Waiver of Liability: In consideration for the foregoing, I for myself, my executors, administrators and assignees, do hereby release the Walworth County Agricultural Society, Inc., and any individuals associated with this campground, for all claim or damages, demands, actions and whatsoever in manner arising or growing out of my stay in said campground.

* Make a copy of this form for your records.

Signature of Authorized Person for Site: _____ **Date:** _____

OFFICIAL USE ONLY:

DATE RECEIVED: _____ SITE# _____

PAYMENT: CREDIT CARD CHECK # _____ AMOUNT: _____

NOTES: