

# Taylor County Cooperative Youth Fair Fair Week Camping Registration Form

Contact person's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Camper Make: \_\_\_\_\_ Type: \_\_\_\_\_ License Plate: \_\_\_\_\_ Length: \_\_\_\_\_

*(If owner of camper is different than contact person above, print camper owner's phone number and address on line above.)*

Reason for wishing to camp on site? (circle one below)

Exhibitor    Fair Board member    Superintendent    Vendor/staff    Other

## Camper occupants

*ALL intended occupants must be listed. Fill out age if under 21.*

*Phone numbers must be those at which each occupant can be reached on-site (if applicable), ie. cell phones.*

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_ Age: \_\_\_\_\_

In order to receive preference, campsites must be requested (with ALL paperwork filled out and payment made) by the dates listed in the policy above.

## Mail this form **WITH \$100** to PO Box 182, Medford, WI 54451

*(Paper form must be received with payment but you may send us a preliminary copy by scanning the paper to a PDF or taking a clear photograph and emailing to witaylorcountyfair@gmail.com )*

*Any paperwork accepted after the deadline will be subject to a late fee of \$50.*

By submitting this form, I am agreeing to the policies above. I've declared all campers and will notify the fair board of any changes or additional needs.

Contact signature: \_\_\_\_\_ Date: \_\_\_\_\_