

2012 NEVADA STATE SPRING SAMBOREE MAR 15-16-17
NEVADA TREASURE RV RESORT PAHRUMP, NV

NAMES (AS YOU WANT THEM TO APPEAR ON YOUR BADGES)	
HIS:	HERS:
GUESTS:	
EMAIL ADDRESS:	(PLEASE COMPLETE IF POSSIBLE)

ADDRESS: Street:	City:
State:	Zip:
	Telephone:

CHAPTER AFFILIATION (NEVADA MEMBERS, THE INFORMATION YOU LIST HERE WILL DETERMINE THE CHAPTER YOU REPRESENT DURING THE GAMES)

Are you a member of a Chapter? Yes No	Chapter Name:
Are you on a state or provincial staff? Yes No	Position:
Is this your first Nevada Samboree? Yes No	If no Chapter is listed, your name badge will read Member At Large

PARKING INFORMATION: ALL PARKING FEES WILL BE PAID ON YOUR ARRIVAL TO THE RV PARK IF CHAPTERS WANT TO PARK TOGETHER, PLEASE CALL OR EMAIL THE REGISTRAR BY JAN 15th

Do you want full-hookups? Yes No Water Sewer 30/50 Amp \$25 plus tax per night	Do you want to dry camp? Yes No Overflow area w/30 amp \$20 plus tax per night
RV information: MH___ 5thWheel___ Trailer___ Length :___ Number of slides:___	ARRIVAL DATE: ___ Has to be listed or no site will be assigned
Do you have a physical challenge? Yes___ No___ Oxygen? ___ Mobility:___	****Every rig will be charged a One time Surcharge \$30 to cover costs for tent, chairs, & table rental

VENDOR INFORMATION:

Do you want a vendor space? Yes___ No___	Product information:
Space is 10 X 10 \$15 Must supply your own tables	Set up at noon on Wed , Tear down & clear by noon Sat

EARLY BIRD ACTIVITY

WILL YOU BE JOINING THE "MYSTERY NIGHT" ACTIVITIES?	Yes___ No___ Number of people?___
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REGISTRATIONS POSTMARKED AFTER FEB 24TH ARE SUBJECT TO A \$10 LATE FEE, ABSOLUTELY NO REFUNDS AFTER FEB 24TH 2012

1 Rig, 2 people \$65 _____
 1 Rig, 1 person \$50 _____
 Guests \$25 _____
 Vendor Fee \$15 _____

Total Amount Enclosed _____

Check Number _____

MAKE CHECKS PAYABLE TO:

NEVADA GOOD SAMs

MAIL YOUR REGISTRATION FORM & FEES TO:

LOIS HALL

P.O. BOX 4049

PAHRUMP NV 89041

QUESTIONS: (775) 751-4846

BEST WAY TO CONTACT FOR QUICK REPLY:

sassycrone@gmail.com

**REGISTRAR'S USE ONLY: SPACE NUMBER _____ DATA COMPLETE _____
 CONFIRMATION _____**