

**2022 MINNESOTA GOOD SAM RV RALLY**  
**CROW WING COUNTY FAIRGROUNDS, 2000 13TH ST SE, BRAINERD, MN, 56401**  
**AUGUST 18<sup>TH</sup> THROUGH AUGUST 21<sup>ST</sup>, 2022**

**THEME:** 50 Golden Years (+ 2)

**DIRECTIONS:** Fairgrounds are located on the South end of Brainerd. From Business Hwy 371, go East on Industrial Park Rd, then north on SE 13<sup>th</sup> St to fairgrounds. Entry will be through the South entrance.

**PARKING:** **EARLY BIRD PARKING WILL START** Tuesday, Aug 16th, **12:00 NOON** through Wednesday, Aug 17th, \$25.00 per night. Additional cost \$5 per day for 20 AMP ELECTRIC. Pay all electric and early bird at Rally. There will be a 24 hr. Generator area. All other areas will have 7:00 am to 10:30 pm generator hrs. **PARKING HOURS: 8:00 am - 6:00 pm DAILY. No parking after 6:00 PM**

**REGISTRATION:** Will start Wednesday, August 17<sup>th</sup>, 9:00 am

**HOSPITALITY:** Please bring 1 dozen cookies per rig to share at hospitality.

**ACTIVITIES:** Tours, Seminars, Games and just plain old fun and relaxation.

**ENTERTAINMENT:** Thursday, Friday, and Saturday Nights.

GET YOUR REGISTRATIONS IN EARLY. NO CONFIRMATIONS WILL BE MAILED.  
**PRE REGISTRATION DEADLINE AUGUST 1st, 2022**

**MAKE CHECK PAYABLE TO:** "MINNESOTA GOOD SAM" **AND MAIL TO:** Andy Rozeboom, State Treasurer  
13651 Bass Lake Rd  
Maple Grove, MN 55311  
Cell # 612-889-6256  
email: ajrozeboom@gmail.com

**EMERGENCY:** PHONE 911 or Brainerd Police Dept. 218-829-2805

There will be a \$10.00 fee on cancellations. **NO REFUNDS ON MEALS!**  
**NO REFUNDS FOR CANCELLATIONS THE WEEK OF THE RALLY**

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**CLIP AND MAIL WITH 2022 REGISTRATION FEE**

**Pre-Registration:** 1 RIG / 2 PEOPLE \$90.00 \$ \_\_\_\_\_ AT GATE \$100.00  
1 RIG / 1 PERSON \$85.00 \$ \_\_\_\_\_ AT GATE \$ 95.00  
EXTRA PERSON \$10.00 \$ \_\_\_\_\_

CHILDREN UNDER 18 – NO CHARGE WITH REGISTERED RIG

*(All Early Bird and Electric to be paid at the Rally)*

CATERED MEAL SAT. \$15.00 PER PERSON (CHILDREN 12 AND UNDER ARE FREE)

NUMBER OF PEOPLE \_\_\_\_\_ x \$15.00 = \$ \_\_\_\_\_

**TOTAL AMOUNT DUE AND MAILED IN \$ \_\_\_\_\_**

NAME(S) ATTENDING \_\_\_\_\_ PH ( \_\_\_\_\_ ) \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE or PROV. \_\_\_\_\_ ZIP \_\_\_\_\_ GOOD SAM # \_\_\_\_\_

CHAPTER \_\_\_\_\_ # ADULTS \_\_\_\_\_ # CHILDREN \_\_\_\_\_

E-mail address \_\_\_\_\_ 1<sup>st</sup> GS Rally Y / N \_\_\_\_\_ 1<sup>st</sup> MN RALLY Y / N \_\_\_\_\_

Electric needed for medical devices? Y / N \_\_\_\_\_ Handicapped parking needed? Y/N \_\_\_\_\_

**\*\*Emergency Contact:** \_\_\_\_\_ Phone # \_\_\_\_\_ \*\*

The undersigned person accepts full responsibility for the welfare of their unit and all persons with their unit while attending the MINNESOTA GOOD SAM RV RALLY.

**SIGNED** \_\_\_\_\_ **DATE** \_\_\_\_\_