

2019 MINNESOTA GOOD SAM RV RALLY
MORRISON COUNTY FAIRGROUNDS, 15575 HAWTHORN RD, LITTLE FALLS, MN
AUGUST 15th THROUGH AUGUST 18th, 2019

THEME: "Fall Harvest Days"

DIRECTIONS: The fairgrounds are located north on Hawthorn Rd, from Highway #27, Little Falls

PARKING: **EARLY BIRD PARKING WILL START** Tuesday, Aug 13th, 12:00 noon through Wednesday, Aug. 14th, \$25.00 per night. Additional cost \$5 per day for 20AMP 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 P.M.**

REGISTRATION: Will start Wednesday, August 14th, 9:00 am to 11:00 am

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

ACTIVITIES: Tours, Seminars, Games, Golf, become part of our Choir, 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 7, 2019

MAKE CHECK PAYABLE TO: "MINNESOTA GOOD SAM" **AND MAIL TO:** Brenda O'Neil, State Treasurer (Appointed)
7584 Hillton Rd.
Royalton, MN 56373
Cell # 320-412-6000 e-mail: bretomoneil@gmail.com

EMERGENCY: PHONE 911 or Little Falls Police Dept. 320-616-5570

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

CLIP AND MAIL WITH 2019 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. \$12.00 PER PERSON (CHILDREN 12 AND UNDER ARE FREE)

NUMBER OF PEOPLE _____ x \$12.00 = \$ _____

TOTAL AMOUNT DUE AND MAILED IN \$ _____

NAMES ATTENDING _____ PH (_____) _____

ADDRESS _____ CITY _____

STATE or PROV. _____ ZIP _____ GOOD SAM # _____

CHAPTER _____ # ADULTS _____ # CHILDREN _____

E-mail address _____ 1st 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** _____