

FOR OFFICE USE ONLY:



Number issued: _____

Date received: _____

By: _____

CAMPING REGISTRATION FORM

All vehicles occupied overnight for any MQHA event must be registered with the MQHA office. Please complete the following information in its entirety. This form will need to be updated if information changes.

Name: _____

Mailing address: _____

Phone number during the horse shows: _____

Email address: _____

Type of RV: [] Horse Trailer [] Bus [] Camper [] 5th Wheel

Total length of unit: _____ feet [] 50 amp [] 30 amp [] 110

Unit width (with slides extended): _____ feet License plate: _____ State: _____

Special needs: _____

Conditions:

1. The information I supply regarding my type of RV will be correct so that I may be accurately placed in a spot that fits my needs and space requirements.
2. I understand that no guarantee can be made that awnings will be able to be extended or that there will be room to park additional equipment or vehicles. Additional trailers may need to be unhooked and parked in a designated area.
3. Reservations will be given priority by date full payment is received. Sponsors and current MQHA board members with full payment are placed first.
4. Prepayment does not guarantee any particular spot on the grounds or placement near any specific neighbor, only that a space will be made available. Arrivals without reservations will be temporarily parked until after all reserved spaces have been accommodated.

5. I agree that if I arrive after hours, I may need to be relocated to my assigned location. I agree to do this without question or argument.
6. I understand that completion of this form does not qualify as a camping reservation and that each event I intend to attend must be reserved and paid for in advance.
7. I hereby agree that MQHA, its employees, Board Members and/or the individual premises, is not liable for any loss or damage of any of my personal property, including but not limited to, RV's, Horse Trailer, automobiles, camping equipment and/or any items brought to the grounds. By signing this form, I agree to hold MQHA and its employees and Board Members, and well as the individual premise owner, harmless of any liability and indemnify the same in the event of damage or loss.

By signing below, I understand and agree to all conditions and terms outlined by MQHA on this and on the previous page. I agree to abide by all rules of MQHA and the individual venues upon arrival. I understand that my failure to do so may result in my removal from the premises.

Signed: _____

Date: _____

Accepted by: _____