

GOOD SAMS OF FLORIDA, INC. 2011 FALL SAMBOREE

THANKSGIVING is the Theme

SOUTHERN PALMS RV RESORT

NOVEMBER 16-20, 2011 EARLY BIRD NOVEMBER 15, 2011

ONE AVOCADO LANE, EUSTIS FLORIDA 32726

www.goodsams-florida.org

REGISTRATION FEE INCLUDES: 4 nights camping with water, electric and sewer (Bring extra cords, and hoses as a precaution) Daily hospitality, samgo, door prizes, crafts and flea market, seminars, Samboree bars, RV Dealers, vendors, entertainment and MUCH MORE.

CANCELLATIONS There will be a processing fee for all cancellations based on cancellation date:

Prior to September 15th \$10.00

September 16th thru October 14th \$15.00

October 15th and forward \$25.00

THERE WILL BE NO REFUNDS FOR "NO SHOWS"

All cancellations and refund requests must be in writing from YOU and emailed to Bob Ward, State Director or Linda Voyton before the samboree ends. WE CAN NOT HAVE CANCELLATIONS AFTER THE SAMBOREE, AND EXPECT TO GET A REFUND. NO TRANSFERS TO ANOTHER SAMBOREE.

*******NO CATERED MEAL*******

NO DEDUCTIONS FOR EARLY DEPARTURE.

WE WILL HAVE CHAPTER PARKING

Handicapped spaces will only be provided for our Handicapped members with proper credentials. PLEASE INDICATE WHETHER YOU WANT TO PARK WITH YOUR CHAPTER OR IN HANDICAPPED SPACES. (NOT BOTH)

Unregistered late arrivals may not be parked with their chapter. **Registration 9-5 NO LATE ARRIVALS**

*****IMPORTANT!! ARRIVE WITH TOWED VEHICLE UNHOOKED*****

MAKE ALL CHECKS PAYABLE TO: GOOD SAMS OF FLORIDA, INC.

RETURN LOWER PORTION OF THIS FORM WITH FEES TO:

Bob Ward, P. O. Box 348, Nobleton, FL 34661-0348

Email: bward5@bellsouth.net Phone# (352) 585-3677

NAME _____
Last First Good Sam # Chapter Name or Handicapped

ADDRESS _____
Street City and State Zip

Handicapped# _____ **Rig Length** _____ **Rig Type** _____
of Adults _____ **# of Children** _____ (A, B, C, trailer, 5th wheel)

SAMBOREE FEE – 2011 FALL SAMBOREE

PREPAID REGISTRATION (\$110.00) \$ _____ **Phone #** _____
EARLY BIRD (\$22.00) \$ _____
SINGLE PERSON RIG (\$100.00) \$ _____ **E-Mail address** _____
EXTRA ADULT _____ **(\$22.00)** \$ _____ **PRINT CLEARLY - (used for confirmation only)**
REGISTRATION AT GATE (\$115.00) \$ _____ **(children under 12 are free)**
TOTAL FEES FOR Fall Samboree \$ _____

IS THIS YOUR FIRST FLORIDA SAMBOREE? YES ___ NO ___

NOTE: We the undersigned understand the Florida Good Sam State Staff has taken reasonable and necessary safety precautions. Therefore, we accept full responsibility for the welfare of our unit and all persons in our unit while attending the Florida Samboree.

DATE: _____ **SIGNATURE:** _____

We, Florida Good Sams Inc., reserve the right to refuse any application.