

Super Rally Registration For

January 16 - 20, 2019



Location: Florida State Fairgrounds
4800 US Highway 301 N., Tampa 33610

RV SuperShow Hours:

Wednesday - Saturday, 9AM - 6PM
Sunday, 9AM - 5PM

**NO
Early Birds!**

Parking: All sites approximately 20' x 40' on grass.
You must come in together to park together.
Groups/Clubs of 8 or more, please contact our office.

Facilities: No Dump Station on grounds. Arrive with full fresh water and empty holding tanks.
No public showers.

Bikes/Scooters: Not allowed in SuperShow grounds.
Only **"Single Seat"** handicapped vehicles are permitted with **Approved** Handicap Placard.

Pets: Allowed on leash. Must clean up after them.

Registration Fees:

\$ 225.00 per rig, up to 2 people
\$ 20.00 each additional person

Note: An extra \$10 will be charged for on-site registrations.

Registration Deadline: **til SOLD OUT**

Includes:

- * 4 Nights of Camping
- * 30 Amp Electric Service Hook-up
- * Coffee & Doughnuts each Morning
- * 3 Nights of Entertainment
- * Free Unlimited Admission to the Florida RV SuperShow

Note: Confirmations will be sent by email if provided.

Cancellation: Must be received in writing by January 10th for a refund. Cancellation Fee: \$15.00.

Thursday: The Rivoli Revue

Ron & Kay are back
with a new show
Exciting, funny & energetic!

Friday: Rick Kelley

"Moonglow to Motown"
Hits of the 40's, 50's & 60's
Singer and Keyboardist

Saturday: The Sweeney's

Country Novelty & Folk Tunes
Clappin' hands & Stompin' feet
A good time for All!!

Make payable to **FRVTA** and mail with bottom portion to:

FRVTA - Super Rally, 10510 Gibsonton Drive, Riverview, FL 33578

For additional information contact us at 813-741-0488 or visit www.frvta.org/show/florida-rv-supershow

----- **DETACH HERE** -----

PLEASE PRINT CLEARLY

Name: _____
Last Attendee 1 Attendee 2

Mailing Address: _____

City/State/Zip: _____

Phone: _____ E-Mail: _____

Handicapped: (Circle) Yes No **Club/Group:** ENTEGR COACH OWNERS ASSOCIATION (If applicable)

Coach/Unit Length (ft): _____ Rally Fee (1 or 2 Persons) **\$ 225.00** **Total Amount Enclosed:**

Type (5W, TT, MH): _____ Addt'l Person \$ 20.00 each **\$** _____ **\$** _____

----- **Do Not Detach** -----

To pay by Credit Card complete below. (Visa, MasterCard, Discover or American Express) Fax to 813-741-0688

Card Number: _____ Expiration Date: _____

Name on Card: _____

Card Billing Address (if different from above): _____