

Shiawassee County Fairgrounds
Non-Fair Camping



Date In: _____ Date Out: _____ Number of days: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

30-amp service _____ at \$35.00 per night \$ _____

50-amp service _____ at \$45.00 per night \$ _____

Person in charge of camping unit: _____

Description of camping unit: _____

License number: _____

Email: _____

I have read and understand the camping rules and agree to follow the same.

Signature

Date

Camp site number _____

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