

WIT Club State, Special Interest, & Regional Rally Registration Form

Name: _____ Spouse/Companion: _____

WIT#: _____

Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

E-mail Address: _____ Cell Phone: _____

Model Year: _____ Length of RV: _____ Number of Slideouts: _____

Name of State/Regional Rally: _____ Date: _____

Registration Fee: (_____ couple/single) (_____ # Additional Adults x Fee _____)

(_____ # Children x Fee _____) First Time: (Y/N) Home State/Province: _____

See rally description as to availability of items listed below and circle all that apply.

Vendor Arts and Crafts Other _____

(In order to receive consideration on special needs, it must be noted on application)

Please explain any special needs, i.e. mobility, parking or other restrictions, which would help us better serve you as you attend this rally: _____

Additional Days Parking: _____ Arrival Date: _____

Special Tours: _____

Optional Meals: _____

President of a Club or Chapter?: (Y/N)

Local Club/Chapter Involved In: _____

TOTAL AMOUNT ENCLOSED \$ _____ (U.S. Funds or equivalent thereof)