



40th Annual State Convention

ROARING

INTO
THE

RV FUTURE



REGISTRATION FORM

Please type or print all information clearly.

Company Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Region #: _____ Business Type: _____

Arrival Date: _____ Departure Date: _____

Registration fees include access to all business meetings, social functions and meals at the events.

	(Men's) T-Shirt Size Small - 3XL	Registration Fee:	
1st Company Employee: _____	_____	\$345.00	\$ _____
2nd Company Employee: _____	_____	\$320.00	\$ _____
3rd Company Employee: _____	_____	Comp	Comp
4th Company Employee: _____	_____	\$320.00	\$ _____
Child Attendee: _____	Age: _____	\$200.00	\$ _____
Child Attendee: _____	Age: _____	\$200.00	\$ _____
Child rate applies to Ages 8-12 Children under 7 years of age are FREE.		Total	\$ _____



BUSINESS SOCIAL FUNCTIONS



Please indicate the number of people attending each function.

_____ Thursday: Welcome Reception

_____ Friday: General Session

_____ Friday: Costume/Dinner Party

_____ Saturday: Game Show Luncheon

_____ Saturday: Awards Banquet
(not recommended for children)

Note: If you have special dietary needs, please advise the State Office in advance.



FRIDAY AFTERNOON ACTIVITIES



PAINT & SIP

Name: _____

Name: _____

Name: _____

Name: _____

GOLF OUTING

Name: _____

Name: _____

Name: _____

Name: _____

Please make checks payable to FRVTA & mail with this form to:
FRVTA Convention, 10510 Gibsonton Drive, Riverview, FL 33578
For payment via credit card, please utilize enclosed transaction form.
Return via email or fax to: AnaC@FRVTA.org/813.741.0688