

DELAWARE COUNTY FAIR CAMPER REQUEST FORM

EXHIBITORS FORM

“Camper City” is a service provided for the convenience of our Animal and Commercial exhibitors only. The following rules MUST be followed by all campers who use this service. Your cooperation will be greatly appreciated.

- 1. New York State rule: **NO AWNINGS OR TENTS BETWEEN UNITS**
- 2. **NO open fires** or **charcoal grills** or **GAS GRILLS**.
- 3. **No Parking of Campers before Friday 8 AM**
- 4. **NO MOVING OF CAMPERS IN OR OUT AFTER DARK WITHOUT APROVAL AND SUPERVISION OF A DIRECTOR**
- 5. You must check in with person in charge before parking camper.
- 6. No one under the age of 21 will be allowed to stay in a camper without adult supervision.
- 7. Water and Electric hook-ups are limited.
- 8. **ALL CAMPERS MUST HAVE ANTI-SIPHON VALUE BETWEEN THE END OF THEIR WATER HOSE AND THE WATER CONNECTION.** If you do not have one, they can be purchased at the Fair.
- 9. **ALL HOLDING TANKS MUST BE CLOSED.**
- 10. **NO DUMPING OF GRAY WATER DURING THE TIME THE CAMPER IS AT THE FAIR.**
- 11. A pumping service will be available once during the Fair. **Sign up below. \$25 paid for when turning in this form**
- 12. **NO PARKING in camper city.** Campers will be issued ONE sticker per camper for lot adjacent to camper city
- 13. In consideration for all campers, **QUIET HOURS** will be from 10:00 p.m. until 7:00 a.m. No loud music, talking, etc. will be tolerated during these times. **NO ALCOHOL ALLOWED.**
- 14. Air conditioners may be operated in specified **LIMITED** spaces only. The fee for those spaces is \$225
- 15. **NOTE WE HAVE A LIMITED NUMBER OF AC SITES. This does not mean that if you request one you will get an AC site.**

CAMPER AGREEMENT STATEMENT I have read and understand the above rules and agree to abide by them. I understand that violating any of these rules will cause me to lose my camping privileges and that my camper will be removed from the grounds.

Name: _____

Address: _____

Phone: _____ Email: _____

Circle main exhibit area you show at Fair: Dairy Cattle Beef Swine Sheep Goats Rabbits Poultry

Vehicle Make _____ **Model** _____ **License Plate** (not camper) _____ **Color** _____

CIRCLE TYPE OF CAMPER: Pop up Truck Camper 5th Wheel Travel Trailer Motor home

CHECK: RIGHT SLIDE-OUT (___) LEFT SLIDE-OUT (___) AIR CONDITIONER (___) LENGTH OF CAMPER: _____

Pump service circle one yes no \$25 _____

LATE REQUESTS WILL NOT BE ACCEPTED No AC \$125 _____

Send this form and camper fee Total by July 23,2025 to the below AC \$225 _____

Dennis Dumond Total _____

4789 County Highway 23

Walton NY 13856 Phone: 607-621-1899 Email: ddumond1@hotmail.com

MAKE CHECKS PAYABLE TO: DELAWARE VALLEY AGRICULTURAL SOCIETY (DVAS)

Revised 1/30/2025