



FAMILY CAMPERS & RVers 2025 CAMPVENTION

“Spirit of Friendship”

July 20-26, 2025

James E Ward Agricultural Center
945 E Baddour Pkwy, Lebanon, TN 37087



REGISTRATION:

Welcome to Campvention 2025. Everyone must complete a registration form, including second families and camp day passes. Submit payment with the completed form. All funds shall be in US currency, including checks and money orders. There will be room for you if you decide to come at the last minute. Simply bring this registration form with you.

****Refund policy:** If you are unable to attend, all except \$25 will be refunded AFTER the conclusion of 2025 Campvention.

Registration deadline May 15th - Pay before December 31, 2024, to receive a \$25 discount (\$325.00).

| | <u>Registration</u> | <u>At Gate</u> |
|---|---------------------|----------------|
| One Family in the Unit | \$350.00 | \$385.00 |
| Extra Family in the Unit (separate pay) | \$180.00 | \$200.00 |
| Week Drive-in Day Pass (June 23-29) | \$175.00 | \$190.00 |
| Drive-in Day Pass (per day) | \$30.00 | \$35.00 |

Early Bird Days: July 18 - 19 @ \$30/night (pay upon arrival – cash/check). The gates will be open Friday at 12 p.m. to 8 p.m., Saturday 9 a.m. to 8 p.m., and Sunday 8 a.m. to 2 p.m.

Are you an FCRV member: Yes ___ No ___ Please provide your Member # if known: _____

Last Name: _____ First Name: _____ Spouse/Guest: _____

Address: _____

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

Phone #: _____ Email: _____ 2ndEmail: _____

Is this your first Campvention? Yes ___ No ___ Are you a Veteran and what branch? _____

Number of people in your unit: Adults: _____ Teens: _____ Youth: 9 – 12 _____ Youth: 5 – 8 _____

Total number of people in Unit: _____

****Please list the names and ages of all youth and teens on the back of this form.**

We would like to help with event(s) at Campvention. Staff will follow up with a contact if yes: Yes ___ No ___

CAMPVENTION PARKING: (There will be no special needs sites available at the gate.)

Check if you are requesting a special needs site: _____ (Valid Handicap parking proof must be presented upon arrival.)

Please note the LENGTH of camping rig behind type:

Motorhome _____ 5th Wheel _____ Travel Trailer _____ Pop-Up _____ Number of slide outs _____

Electricity: 30 amp _____ 50 amp _____ (50amp is limited. Handicap first. Then first come, first served.)

****Bring extension cords. Water available. Bring hoses and Y connectors.**

MAKE CHECKS PAYABLE TO: FCRV Campvention 2025 Funds

Mail checks and completed forms to:

FCRV Campvention 2025
137 Crandon Blvd.
Cheektowaga, NY 14225

For inquiries please call (716) 668-6242.
Confirmations will be sent via Email.
Please allow a month for Processing.