



WILL ROGERS
MEMORIAL CENTER
FORT WORTH

RV & Overnight Camping Information

- Reservations will be confirmed on a first come, first served basis, full payment due at time reservation is confirmed.
- RV applications must be completed and returned to the e-mail address or fax number listed below. All reservations must have a completed application prior to reservation being confirmed. Applications may not be completed over the phone.
- All RV spaces are for trailers with living quarters only.
- Spaces are assigned on a first come, first served basis and according to size of the RV.
- Showers available in the Swine Barn and Will Rogers Coliseum.
- ***RVs must have permits/documentation provided by WRMC prior to accessing campgrounds. No exceptions.***
- No Refunds.
- Limited Generator parking in trailer lots.
- Spaces rented at show rate only. No daily rentals.

Rates:

North Red Lot (104 spaces) - North of John Justin Arena - 30/50 amp hook-up (water, electric, sewer) - \$420

Yellow Lot (78 spaces)- South end of Trail Dr. - 30/50 amp hook-up (water, electric, & sewer) - \$420

West Red Lot * (22 spaces) - by Swine & Sheep Barn - 30 amp hook-up (water and electric Only) - \$210

*vehicles 33' or smaller not including tow vehicle.

Completed applications should be returned to:

julie.norton@fortworthtexas.gov
817-392-8170 - Fax

For more information:

Contact the RV Office (817)392-8115
julie.norton@fortworthtexas.gov



RV Space Reservation Form



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Use one form per RV. See attached for prices and instructions.

- Preference: 30 amp hook-ups (West Red Lot)
 30/50 amp hook-ups (North Red Lot near John Justin Arena)
 30/50 amp hook-ups (Yellow Lot south end of Trail Dr.)

S	M	T	Th	F	S
	25	26	27	28	1
3					2

Arrival date: _____ Departure date: _____ Total number of nights: _____

1. Is generator parking okay? yes no

2. Do you wish to remain on the waiting list for full hook-ups?

Special Requests: _____

We will do our best to accommodate special requests, however we are unable to guarantee.

Total Length of RV/trailer (including gooseneck): _____

RV/trailer license #: _____ State issued: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime phone: _____ Fax: _____

Cell phone: _____

E-mail: _____

Total enclosed: \$ _____

Payment Information

Name of person paying fees (if different than above): _____

Circle One: MasterCard VISA American Express Discover

Credit card #: _____ Exp. date: _____ CVV #: _____

Name as it appears on card: _____ Signature: _____

I give permission for COFW to charge my credit card for this RV Reservation

Office Use Only	Date Received
	C/R#
	Paid Date
	Lot/Space #
	Parking Pass #