



Gratiot County Fair for Youth Off Road Vehicle Registration Application

Registration Fee: \$25.00 by July 21
\$35.00 after July 21



Applicant Information & Agreement

Name: _____

Address: _____

City: _____ Zip Code: _____ Phone Number: _____

Campsite Number: _____ Phone during fair week: _____

Description of vehicle: _____

I/we have proof of insurance and liability insurance covering this Off Road Vehicle up to \$300,000 per incident and we have attached a copy of our insurance declarations page showing this coverage.

I have read and understand and agree to follow the Off Road Vehicle Rules:

- Off road vehicle rules are in effect when the vehicle arrives at the Fairgrounds.
- Off road vehicles must be operated in a safe and orderly manner.
- All off road vehicles must be registered and they must possess an insurance policy that provides \$300,000 liability insurance coverage for operation of the vehicle on the grounds. Written documentation of this coverage must be submitted when the vehicle is registered.
- Operators and passengers of off road vehicles must comply with the manufacturers operating instructions.
- Operators and passengers of off road vehicles must comply with the manufacturers seating capacity requirements.
- Driving on the Midway is prohibited.
- The intent of off road vehicles on the fairgrounds is to assist with animal chores, transportation of guests with limited mobility and official fair activities.
- Registration forms are available online and at GCFY's Office. The registration fee is \$25.00 if paid on or before July 21 and \$35 after that date. Fee must be submitted with form. Once the form and fee are submitted you will receive a permit that must be visible and on the off road vehicle at all times.
- **NO WARNINGS WILL BE GIVEN!** If any of these rules are broken the vehicle must be removed from the fairgrounds or immobilized. Failure to do so may result in expulsion from the fairgrounds and/or loss of campsite.

Signed _____

Date _____

Rct. No. _____
Lic. No. _____
Plate No. _____
Proof of Ins. _____