

Test Drive Application

Company Name: _____

Contact Name: _____

NUMBER OF SPACES:
_____ x \$425

TOTAL:
= _____

Send payments to: RV Industry Association, 1896 Preston White Dr., Reston, VA 20191, ATTN: Kelly Smith

THIS SECTION IS FOR RV INDUSTRY ASSOCIATION PERSONNEL ONLY

Date Received: _____

Amount Paid: _____

Check #: _____

Amount Due: _____

Test Drive Questions? Contact Tom Gaither (951) 567-3608 tgaither@rvia.org