

PRE-REGIS	TRATION \$30) // REGIS	TRATION	N ON DAY OF SHOW \$40
Registrat	ion form MU	ST be fil	led out e	entirely - Please print
DATE:	NAME:			
CITY:		ZIP:		PHONE:
EMAIL:				(REQUIRED)
CAR CLUB:				Release of Liability: By participating in – this event you assume all liability and by
YEAR:	MAKE:			no means/reason do you hold the Fair - Oaks Chamber of Commerce or anyone
				associated with the promotion of this event liable or responsible for any
TSHIRT SIZE:				incurred. All cars must be running and
CIONATURE				drive-able. NO REFUNDS INT.

MAIL TO: PO BOX 352 FAIR OAKS CA. 95628 OR DELIVER TO: 10014 FAIR OAKS BLVD. FAIR OAKS CA. 95628 PHONE NUMBER: 916-967-2903

SIGNATURE:

SPACE FOR OFFICE RECORDS ONLY