

# Elk River Classic Car Show

## Registration Form

*(all proceeds go to Vo-Tech Scholarship for Whitepine School District Graduate)*

Owner/Participant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_ Color: \_\_\_\_\_

Make & Model: \_\_\_\_\_

**Liability Waiver:** *In consideration of the acceptance of the right to participate, entrants, participants and spectators by execution of this form release and discharge the Elk River Classic Car & Motorcycle Show committee and its officers, agents, representatives and anyone else connected with management or presentation of this event of and from any and all damages, losses, injuries, judgements, and/or claims form any cause whatsoever that may be suffered by an entrant to his or her property, further, each entrant expressly agrees to indemnify all the forgoing entities, firms, persons and bodies of and from any and all liability occasioned or resulting from the conduct of entrants or any participant assisting or cooperating with entrant under direction and control of the entrant. Upon submitting my application for entry in the Elk River Classic Car & Motorcycle Show, I agree to abide by the show rules and regulation and to accept the decisions of the officials. Elk River Classic Car & Motorcycle show will not be responsible for accidents or articles lost or stolen.*

Owner/Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PAYMENT INFORMATION:**

Circle One: VISA MC DISC AM Name on card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp. Date: \_\_\_\_\_ - \_\_\_\_\_ 3-digit code: \_\_\_\_\_ Billing zip: \_\_\_\_\_

**Make checks payable to:** *Elk River Fireworks Association*

**Mail to:** *P.O. Box 150, Elk River, Idaho 83827* or **Fax to:** *208-493-3012*