



SHOW AND SHINE REGISTRATION

Fee: \$20.00 for the first entry, \$5.00 for each additional entry under the same ownership. Cash: _____ Check: _____

Name: _____

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Address: _____

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City: _____ State: _____

Zip: _____

Phone: _____

Cell: _____

Email: _____

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Year: _____ Make: _____

Model: _____

Year: _____ Make: _____

Model: _____

Year: _____ Make: _____

Model: _____

Liability: In consideration of the acceptance of the right to participate, entrants, participants and spectators by execution of the form, release and discharge The Townsend Rotary Club of and from all known and unknown damages, losses, injuries, judgments, and/or claims from any cause that may be suffered by entrants to his person or property. Each entrant agrees to indemnify all forgoing entities, forms and persons of any and all liability occasioned or resulting from the conduct of an entrant or participant assisting with the entrant and under the direction or control of the event.

Signature: _____

Date: _____

Signature: _____

Date: _____

(Guardian if entrant is under 18 years of age)

Contact: Jerry (406)465-2331 Jamie (406)980-0122 jamiewilliams65@yahoo.com