

KINGSFORD CENTENNIAL
"WOODWARD CRUISE"
& CAR SHOW

Registration Form

PARTICIPANT INFORMATION

NAME: (FIRST &
LAST)

ADDRESS:

PHONE:

EMAIL:

VEHICLE DETAILS

YEAR

MAKE

MODEL

COLOR

CLUB AFFILIATION (IF ANY)

I WILL PARTICIPATE IN THE FOLLOWING:

CRUISE

CAR SHOW

BOTH

BY SIGNING THIS AGREEMENT AND SUBMITTING THIS REGISTRATION FORM, I AGREE TO RELEASE ALL PARTIES THAT ARE PART OF THIS EVENT, PROPERTY OWNERS OR ANYONE ASSOCIATED WITH THE ORGANIZATION, AND/OR PROMOTION OF THIS EVENT FROM ANY RESPONSIBILITY, LIABILITY OR DAMAGE THAT MAY BE INCURRED FROM MY PARTICIPATION IN THIS SHOW, AND I UNDERSTAND THAT I WAIVE MY RIGHTS TO ANY LEGAL ACTION AS SUCH.

SIGNATURE

DATE: