

**Car Show Registration:**

Full Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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

**Car Information:**

Make \_\_\_\_\_

Model \_\_\_\_\_

Year \_\_\_\_\_

**Motorcycle:**

Make \_\_\_\_\_

Model \_\_\_\_\_

Year \_\_\_\_\_

Signature: \_\_\_\_\_

By signing and submitting this registration from I hold Chautauqua Cruiser, Inc.; Walton County Shrine Club; and any or all officer and members of said organizations harmless in the event of damage, theft or other loss to my vehicle or myself while attending this event.