



CAR SHOW

(REGISTRATION FORM)



NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

YEAR _____ MAKE _____ MODEL _____

Registration #

DISTANCE TRAVELED _____ *Clubs* _____

E-mail address: _____

In consideration of the acceptance of the right to participate, entrants, participants, spectators, families and guests, release and discharge Shenandoah Valley Coalition for Christ, the event venue and everyone else connected with or from any and all known or unknown damages, injuries, losses, judgments, and/or claims from any cause whatsoever that may be suffered by any entrant of his person or property. Groups, Churches, Individuals or Organizations or Businesses are all released from any liability and will not be held responsible in any way.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT:

SIGNATURE _____ DATE _____

Signature of guardian if you are under 18 years of age:

Signature: _____ DATE _____

NO ALCOHOLIC BEVERAGES - NO TOBACCO PRODUCTS
NO BICYCLES OR SKATE BOARDS

Mail completed form back to:
Shenandoah Valley Coalition for Christ
Attn: Sharon Hollar
PO Box 304
Edinburg, Va 22824
540 335 3939
www.svcc4us.com
shencochurches@yahoo.com
wepray4u@hotmail.com

*** Make check payable to:
SVCC