

# REGISTRATION

## Eliminators Riverside Run *Open to all special interest vehicles*

Vehicle Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

**Participant:** \_\_\_\_\_  
(Surname) (Given name)

If under 19 years of age please have parent or guardian sign waiver. \*

Spouse/or: \_\_\_\_\_  
(Surname) (Given name)

Address: \_\_\_\_\_  
(Number & Street) (Box or Route)

\_\_\_\_\_  
(City//Town) (Prov/State) (Postal/Zip Code)

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Club Affiliation:** \_\_\_\_\_ **Distance Traveled:** \_\_\_\_\_

Names of Children (Family Members: 16 years and younger)

\_\_\_\_\_  
(Surname) (Given name) (Age)

\_\_\_\_\_  
(Surname) (Given name) (Age)

\_\_\_\_\_  
(Surname) (Given name) (Age)

**\*\* Extra Adults (limit of 2 per registration @ \$15.00 each)**

\_\_\_\_\_  
(Surname) (Given name)

\_\_\_\_\_  
(Surname) (Given name)

**NUMBER ATTENDING THE SUPPER:** \_\_\_\_\_

Applicant hereby assumes any and all responsibilities for injury or damage caused by himself or any member of his party while participating in ELIMINATORS RIVESDE RUN and does release from liability for any such injury or damage, Eliminators Car Club and its members.

\_\_\_\_\_  
(Date) (Signature of Participant)

***\*If the participant is under the age of 19 years, the following waiver must be signed by either a parent or guardian.***

As above participant is under the legal age I will be responsible for injury or damage caused by him/her or any member of his/her party while participating in ELIMINATORS RIVERSID RUN and does release from liability for any such injury or damage, Eliminators Car Club, and its members.

\_\_\_\_\_  
(Surname) (Given name) (Signature)

Mail entry to:  
Eliminators Car Club  
PO Box 116  
Swift Current, SK S9H 3V5