

# “Eliminators”



## 39<sup>th</sup> Annual Riverside Run 2019

**AUGUST 16, 17 AND 18**

Swift Current, Saskatchewan, **ELMWOOD PARK**

**DASH PLAQUES FOR THE FIRST 100 ENTRANTS**

(Eliminators Car Club established 1970)

**REGISTRATION:** Open to all Special Interest Vehicles.

**Pre-registration** received by **August 1<sup>st</sup>** will be entered for a special door prize.

Registration hours are 5:00 pm to 10:00 pm Friday, and 9:00 am to 12:00 noon Saturday @ Eliminators Car Club, 1255 North Railway West.

**COST:** non refundable Pre-registration fee is \$30.00 per vehicle carrying up to two (2) adults and children (family members) 16 years and younger received by Aug 1st.

Registration at the gate is \$40.00 per vehicle.

**ENTERTAINMENT:**

**Friday:** Cruise, Meet & Greet Hospitality night

**Saturday:** Show and Shine, Valve cover races, Supper, Party and door prizes

**Sunday:** Breakfast 9:00 am – 11:00 am

Mail entry to:

**Eliminators Car Club**

**PO Box 116**

**Swift Current, SK. S9H 3V5**

**(306) 773-2313**

**(Please bring a non-perishable food item for donation to the Food Bank to the Show & Shine)**

For more information, contact:

**Montie Williams: (306) 774-3058 cell**

**Mel Knockaert: (306) 750-1226 cell**

**e-mail: [eliminators@sasktel.net](mailto:eliminators@sasktel.net)**



# REGISTRATION

# \_\_\_\_\_

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

Amount Paid \_\_\_\_\_  
***Cheque, PP, Cash***

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 Code/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 RIVERSIDE 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 RIVERSIDE RUN and does release from liability for any such injury or damage, Eliminators Car Club, and its members.

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