



Team Automotive Car Show Registration Form

Saturday, October 14th, 2017 8AM - 4PM (Registration 8AM - 10AM)

APSU: Fortera Stadium Parking Lot (front side)

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Make _____ Model _____ Year _____ Color _____

Club (If affiliated with one) _____

E-mail _____

Vehicle Number Given _____

LIABILITY; In consideration of the acceptance of the right to participate: entrants, participants and spectators: by execution of this form release and discharge Team Automotive (DonJohn, LLC) and any show sponsor or affiliate and of and from any and all known or unknown damages, injuries, judgments, and/or claims from any cause whatsoever that may be suffered by any entrant to his or her property. Participants are liable for all guests registered under their name.

Signature of Entrant (and Guardian if under 18) _____