



Vehicle Registration # _____

SEPTEMBER 21, 2024

VEHICLE REGISTRATION

\$20.00 SHOW REGISTRATION FEE

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Vehicle Year: _____ Make: _____ Model: _____

Choose all that apply:

Car Truck Motorcycle Street/Strip Other: _____

In consideration of the acceptance of the right to participate, the undersigned entrant by execution of this entry form, releases and discharges the wheatfield chamber of commerce and the town of wheatfield, its officers, employees, agents and representatives of and from any known or unknown damages, injuries, losses, judgments, and/or claims for any cause whatsoever that may be suffered by an entrant to his person or property. Further, each entrant expressly agrees to indemnify wheatfield chamber of commerce, the town of wheatfield, its officers, employees, agents and representatives and all other entrants, firms, persons, and bodies of and from any and all liability occasioned by or resulting from the conduct of an entrant or any participant assisting or cooperating with entrants under the direction of control of entrant. The entrant agrees that participation in any contact games, or activities may be limited to vehicles, which have been pre-registered or have met registration requirements.

Signed: _____ Date: _____

Pay by: Cash Check Paypal (wheatfieldchamber)

Questions? Contact Bill Davis at (219) 816-1731.

Mail and Make Checks Payable to:

Wheatfield Chamber of Commerce, P.O. Box 183, Wheatfield, IN 46392