



2017

Registration Form

Owner's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____

Email: _____

Make of Auto: _____

Model: _____

Year: _____

Pre-registration: \$5. Day of show: \$10. Please make checks payable to the Town of Matthews.

Or pay by credit card: VISA MC AMEX DISC Total amount to charge: \$ _____

Card number: _____

Exp: _____ CV Code _____

Undersigned shall in no way hold the Town of Matthews liable for accidents or claims which may occur in connection with this event, and hereby releases and waives any and all rights, claims, or causes of action it may have against the Town of Matthews, its officers and employees, for personal injury, death or other damage that may result from attending this event. Further the undersigned agrees to save and hold harmless the Town from any and all claims or suits alleging personal injury, loss, and/or property damages on account of or connected with this event. Undersigned is responsible for their vehicle (s) and personal belongings while at event.

When applicable, Undersigned authorizes Town of Matthews to charge the credit card account number listed above for the stated total amount to charge.

Signature: _____ Date: _____

Mail to: Town of Matthews Parks & Recreation, Attn: Barbara Davis,
100 McDowell Street, Matthews, NC 28105. Scan and email to bsdavis@matthewsnc.com.
Or fax to (704) 321-3462. Thank you!

