

# 5<sup>th</sup> ANNUAL AMERICAN LEGION POST 304 CAR SHOW

**June 12, 2021**

(Rain Date June 19, 2021)

Noon to 4pm (Load in starts at 10am)

4220 Main Street, Acworth, GA 30101

(Print and mail form to address above)

**EARLY REGISTRATION FEE (Before May. 31): \$15**

Entry Fee after May 31: \$20

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

eMail: \_\_\_\_\_

## Vehicle Information

Make: \_\_\_\_\_ Model: \_\_\_\_\_

Year: \_\_\_\_\_ Special Features? \_\_\_\_\_

Exterior Color: \_\_\_\_\_ Interior Color: \_\_\_\_\_

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## Hold Harmless Agreement:

I agree to insure my vehicle(s) and property against loss, damage, liability and to provide proof of insurance to American Legion Post 304. I agree to assume the risk of any and all damages or in injury and to indemnify and harmless American Legion Post 304, its officers, directors, agents, employees, and chapter for any acts of omissions which may result in theft, damage, or destruction of my property and injury to me or others occurring during, or as a consequence of this event, where located.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make your check payable to: American Legion Post 304

If you wish to pay by Credit Card, please enter your information below and sign for payment.

Name on card: \_\_\_\_\_ (Circle one) Visa / AmEx / MasterCard

Credit Card # \_\_\_\_\_

Expiration date: \_\_\_\_\_ CCV (on back of card): \_\_\_\_\_ Amount: \$15 / \$20 / OTHER \_\_\_\_\_

I hereby authorize the American Legion, Post 304, Acworth, GA, to charge the above-listed credit card in the amount indicated for reservation and entry of my vehicle(s) for the 5th Annual Car Show on October 26, 2019.

Signature: \_\_\_\_\_

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## POST 304 USE ONLY

Registration #: \_\_\_\_\_ Payment Received Date: \_\_\_\_\_ Check / CC (circle one)