

Registration Form

Collierville Police Department's Annual Classic Car Show

Official Use Only. Entry #

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ ZIP: _____

Vehicle Year: _____ Make: _____ Model: _____

Body Style: _____ Insured By: _____

Number of Vehicles Entering: _____ X \$25.00/Vehicle **Amount Enclosed: \$** _____

Signature of Entrant: _____

Make All Checks Payable to: Collierville Education Foundation

Liability: Entrants and participants by execution of this form, release and discharge the Town of Collierville, the Collierville Police Department, Landers Ford, Central Church, Collierville Education Foundation or any other event sponsor, their officers, directors, employees, agents, representatives, servants and anyone else connected with the presentation of the Collierville Police Department's Annual Classic Car Show from any and all known and unknown damages, injuries, losses, judgements and/or claims from any cause whatsoever that may be suffered by any participant to his/her property.