

GLASSPORT COMMUNITY CAR CRUISE 2017

Classic Car Registration Form



YOUR INFO

First Name

Last Name

Street Address

City

State

Zip

Phone (optional)

Email

(Used only in case of Chinese Auction items, door prizes or trophies)

(Used only for future Car Cruise contact)

CLASSIC CAR INFO

Make

Model

Year

Color

Signature of entrant:

REGISTRATION WILL NOT BE PROCESSED UNSIGNED

By registering to participate, I, the above signed agree not to hold the event coordinators, Glassport Development Corp., Glassport Borough, or the property owner(s) liable for any damages to my vehicle as a result of my participation. Also, because of insurance liabilities, we must inform participants that we do not permit, condone, or participate in "burnouts" or trick riding on any properties where events are held. Your signature signifies your adherence to our policies.

NOTE: Mail your completed form to:

Glassport Development Corp, P.O. Box 31, Glassport, PA 15045

Car Registration #

(for event staff to complete)