GLASSPORT COMMUNITY CAR CRUISE





Classic Car Registration Form

YOUR INFO				-
First Name	Last Name			ļ
Street Address				l
City		State	Zip	
Phone (optional)	-1	Email		L
(Used only in case of Chinese Auction items, door prizes or trophies)	door prizes or trophies)	(Used only for future Car Cruise contact)	Car Cruise contact)	I
CLASSIC CAR INFO				
Make	Model	Year	Color	
	i	I		l
Signature of entrant:				

REGISTRATION WILL NOT BE PROCESSED UNSIGNED

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

NOTE: Mail your completed form to:

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