

NHSMA Annual Winter Rally Registration Form

Participant Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Year: _____ Make: _____

Model: _____

Engine Make: _____

CC/HP: _____

____ Original ____ Restored ____ Feature
____ Youth ____ Teen

Reg # _____

Reg # _____

Reg # _____

Reg # _____

Reg # _____

Reg # _____

Liability Agreement: In consideration of the acceptance of the right to participate, participants and spectators, by signing this release, release and discharge NHSMA and all of their volunteers who help in the running of the 2015 NHSMA Annual Winter Rally of and from any and all known or unknown damages, injuries, losses, judgments and/or claim from any cause whatsoever by signing this liability agreement, expressly agrees to indemnify and hold harmless all of the foregoing entities, firms, persons and/or bodies of and from any and all liability occasioned or resulting from the conduct of any participant assisting or accompanying or cooperating with participants. Further, participants agree that he/she has the authority that all of the terms as set forth herein shall be binding as to his/her minor children and guests who may be accompanying participant during this event.

Participant Signature: _____ Date: _____

