

## **2020** ChillAxle Car Show Registration Form

**Contact Information:** 

1.

	CAR #	(1 car per for	m: office use only)
Name:	Phone:		
Address:	City:	_State:	_Zip:
Email:	Club Affiliation (if applicable)		

Release: In consideration of and to permit my participation in showing one or more vehicles in ChillAxle: The Central Washington Car Show and RC Car Race to be held in Ellensburg, Washington on June 27, 2020, I hereby acknowledge and accept the risk of possible personal injury resulting from or caused by my participation in the car show. I hereby acknowledge and affirm my continued willingness and desire to participate. Further, and of my own free consent and volition and in consideration of my participation in the car show, I hereby agree to indemnify and hold harmless the Kittitas County, Kittitas Valley Event Center, and all other affiliated sponsors and volunteers and do hereby waive claims for any and all injuries caused of action, or damages that I or my vehicle(s) may sustain while participating in the show. By signing below, I acknowledge that I have read and understood this waiver and release of liability and I am signing it voluntarily. I acknowledge that I have current and valid insurance on the vehicle I have registered.

Signature:					Date:			
Vehicle Info	rmation:							
Year:	Make:				Model:			
Engine:	Horsepow	ver:	Color:		-			
Check One:	□Unrestored	□Stock	□Modified	□4x4	□Rat Rod	□Modern Muscle Car	□Motorcycle	□Street Rod
Please list any special features, options, interesting history or any other information of special interest:								
Payment	Options:							
Entry fee: Pre-Registration ~ \$20.00 per vehicle				Day of Registration	n ~ \$25.00 per	<sup>r</sup> vehicle		
□Check (#_	)	l	□Cash □Cre	edit Card				

□Card #	Exp. Date:V-Code:			
PLEASE COMPLET	E THIS SURVEY			
~ You will be entered into	o a drawing for prizes~			
Are you a Kittitas County Resident? $\Box$ Yes $\Box$ No	5. How did you hear about this event?			
How many vehicles did you bring?	□Facebook □ radio □ website □friends □Magazine/publication			
1. Are you staying overnight? □Yes □No □Local Resident	6. Is it your first time that you attended an event in			
Paid accommodations? $\Box$ Yes $\Box$ No				
How many nights?	Kittitas County? □Yes □No			
	7. Will/did you enjoy the swap meet while here?			
Please provide your Zip Code	□Yes □No □vendor			
2. How many people are in your party?	8. Will you attend ChillAxle Classic Car Show and RC Car Race again			
3. Did you travel from more than 50 miles away? $\Box$ Yes $\Box$ No	□Yes □No			
4. Will you enjoy other activities while in Ellensburg or Kittitas	9. Will/did you enjoy the RC Races while here? □Yes □No			
County?   Yes  No  Local Resident	10. What would you like to see at ChillAxle?			
Please let us know what you plan to do:				
	This information is used by our local lodaina tax committee t			

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For more information please contact: Kady Porterfield (509)962-7639 kady.porterfield@co.kittitas.wa.us Karey Connor (509) 962-7639 Karey.connor@co.kittitas.wa.us 901 East 7<sup>th</sup> Ave, Suite 1, Ellensburg, WA 98926