



Big Island Auto Club
50th Annual Labor Day Car Show
PARTICIPANT REGISTRATION FORM

OWNER/DRIVER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____

YEAR: _____ MAKE: _____

MODEL: _____

BY SIGNING BELOW YOU ACCEPT RESPONSIBILITY FOR YOUR VEHICLE AND YOURSELF. YOU RELEASE FROM LIABILITY THE BIG ISLAND AUTO CLUB, KAMA'AINA MOTORS AND THE CAR SHOW ORGANIZERS.

OWNER/DRIVER SIGNATURE: _____

DATE: _____ EMAIL ADDRESS: _____

FOR MEMBER USE ONLY:

CAR SHOW REGISTRATION FORM ENTRY#: _____

Completed forms can be sent to biachawaii@gmail.com or sent to a BIAC Board Member.

Staging will be from 12p - 2p. Car show starts at 2p and ends at 8p. We plan to be out of Kama'aina Motors by 9p.