

IFRC SWAP MEET REGISTRATION

[Type or Print Plainly]

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____

Number of 12' x 30' spaces required: Member _____ spaces at \$30.00 per space = \$ _____

Non-Member _____ spaces at \$40.00 per space = \$ _____

SWAP MEET CONTENTS [required] _____

Automotive Parts [identify] _____

Restoration Supplies / Tools [identify] _____

Literature [identify] _____

Non-Automotive [identify] _____

CAR FOR SALE Model _____ Year _____ at \$30.00 each = \$ _____

REGISTRATION FOR IFRC CONVENTION NO YES [Please circle]

I accept and assume full liability for any injury or loss to me or my property, agents or employees at any time and from any cause while on the premises of the show. I expressly release the International Ford Retractable Club and Holiday Inn Lakeview, Clarksville, Indiana.

Signature Required _____ Date _____

REGISTRATION SUBMITTED WITH INCORRECT FEES WILL BE RETURNED AND NOT PROCESSED.

For Office Use Only: Processed _____ Reg. # _____ Swap # _____