

FALL FLING 29 2025 SIGN IN SHEET

Please legibly fill this form BEFORE you get to the cashier! Please sign the release!

Bring this to show and speed up you entry time!

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE(____) _____ Email _____

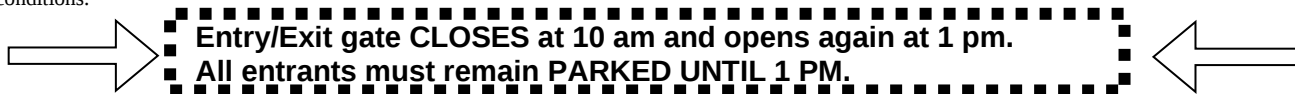
Must Check: ☐ CAR SHOW ☐ SWAP SPACE

YEAR _____ MAKE _____ MODEL _____

Do you want to receive flyers by mail or Email?:

☐ Email ☐ Postal Mail

LIABILITY WAIVER: I release and discharge C. Performance West Inc. and its members of any and all known and unknown damages, injuries and claims from any causes that may be suffered by this entrant it his person or property related to this event. I also agree to permit C. Performance West Inc. to use names, pictures, and photos for advertising and publicity purposes, and relinquish any rights whatsoever. C. Performance West Inc. will not be liable for refunding fees under any conditions.



Signature of Entrant _____ Date _____

website