

Wheels & Wine
Sunday, September 8, 2019

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Club Affiliation: _____

Car: Year: _____

Make: _____

Model: _____

Color: _____

Phone: _____

Email Address: _____

Signature: _____

I understand that FSCC is not responsible for loss or injury to me, or my property, at anytime during this event. I expressly release the promoters from any liability for such loss or injury. I also agree to pay for my own insurance. By signing this registration, I here by agree to these terms.

Please print, and mail completed form to:

First State Corvette Club, PO Box 275, Camden, DE 19934

Make checks payable to FSCC