

Tractor Show Registration Form August 8th- 115 1st ST

108 E Main Street Laurel, Mt 59044 www.laurelmontana.org

Name:				
Address:				
City:	State:	Zip:	Phone:	
Email Address:				
Vehicle Information:				
Make				
Model				
Year				

Binding Waiver of Liability: By signing this Car Show Registration Form, I understand that I am responsible for my vehicle and its contents. I/We hereby release Laurel Chamber of Commerce/City of Laurel from all liability for all personal injuries, losses, and damage to property caused by or arising from the event described herein. I/We personally agree to be responsible for all persons in my party, including family members and/or guests. I/We execute this waiver voluntarily and with full knowledge of its significance.

Signature _____

Date_____

Mail completed registration to:

Laurel Chamber of Commerce 108 E Main Laurel MT 59044 or

laurelchamber@laurelmontana.org