

CHERRY'S JUBILEE OFFICIAL ENTRY FORM

September 23-27, 2009 (PLEASE PRINT)

Last Name: _____ First Name: _____

Guest/Spouse: Last Name _____ First Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Daytime Phone: () - _____ Evening Phone: () - _____

Club Affiliation: _____ EMail: _____

CAR INFORMATION: Make/Model _____ Year: _____ Color: _____

SECOND CAR: Make/Model _____ Year: _____ Color: _____

Classic, Sports & Special Interest Car/Motorcycle Package

EARLY BIRD ENTRY FEE \$95 (If postmarked by Aug. 15th).....\$ _____

ENTRY FEE \$105 (If postmarked after Aug. 15th).....\$ _____

SECOND CAR ENTRY FEE \$15
(Does not include special gift, Pancake Brakfast or tokens).....\$ _____

SOCK HOP Free

Full entry includes 1 FREE SPECIAL GIFT

Working Show Trucks (Big Rig's)

EARLY BIRD ENTRY FEE \$95 (If postmarked by Aug. 15th).....\$ _____

ENTRY FEE \$105 (If postmarked after Aug. 15th).....\$ _____

Includes 1 FREE SPECIAL GIFT

SOCK HOP Free

ADDITIONAL ITEMS TO PURCHASE:

Event Entry: \$10/adult _____; \$8/seniors _____; \$5/6-12 yrs. old _____ \$ _____

Sunday morning breakfast _____ times \$10 each.....\$ _____

Hats _____ times \$20 each.....\$ _____

T-Shirts:

Shirt sizes: S, M, L, XL, XXL, XXXL.

Shirts: Size _____ times \$15 each.....\$ _____

Size _____ times \$15 each.....\$ _____

Please make checks payable to Salinas Valley Memorial Hospital Foundation. **TOTAL AMOUNT** \$ _____

VISA/MC/DISCOVER ONLY: # _____

* Please note charge will appear on your account as Salinas Valley Memorial Hospital Foundation.

EXP. DATE: _____ SIGNATURE _____

Release of liability form to be signed at time of check-in at event.

CAR ENTRIES ARE LIMITED AND SUBJECT TO CHERRY'S JUBILEE DISCRETION.

EVENT IS OPEN TO MOTORCYCLES, CARS AND TRUCKS.

PARKING WILL BE ASSIGNED AT THE DISCRETION OF CHERRY'S JUBILEE STAFF.

THE EVENT WILL BE HELD RAIN OR SHINE.

\$15 REFUND FEE NO REFUNDS GIVEN AFTER AUGUST 25, 2009.

FINAL REGISTRATIONS WILL BE ACCEPTED AT EVENT.

PROOF OF INSURANCE, CURRENT REGISTRATION AND A VALID DRIVER'S LICENSE WILL BE REQUIRED AT EVENT CHECK-IN REGISTRATION.

PLEASE MAIL ENTRY TO:
CHERRY'S JUBILEE
P.O. BOX 4760
SALINAS, CA 93912-4760

LATE REGISTRATION? REGISTER ON FRIDAY, SEPTEMBER 25th AT EVENT

FAX (831) 753-5185 UNTIL 12:00 NOON WEDNESDAY, SEPTEMBER 23rd.

QUESTIONS? CALL (831) 759-1836

ALL PROCEEDS GO TO SALINAS VALLEY MEMORIAL HOSPITAL FOUNDATION

WWW.CHERRYSJUBILEE.ORG