

## Montana Pioneer and Classic Auto Club's Fall Tour

## September 7- 8- 9, 2018 Presented by Capital Carriages Car Club, Helena Montana

## REGISTRATION

Name:		Family/Gue	ests	
Address:			State	710
Phone:()	Cell Phone: (	)	E-Mail Address:	ZIP
Local Club Affiliation	1:			
Insurance Carrier:				
Vehicle: Year:	_Make:		Model:	
Registration Fee inclu	des: Friday Tour Train, F	riday evening m	neal, Saturday lunch	banquet, Sunday breakfast,
and assurted beverage	s and treats.	1	,	omiques, sanding oreakitasi,
Registration fees:	_ Adults @ \$ 85.00 each		\$	
	_Children under 12 years	@ \$ 42.00 each	\$ \$	
Lat	te fee additional \$15.00 a	fter Sept. 1, 2018	8 \$	
Tot	al enclosed:		*	
Make Checks payable	to Capital Carriages Car (	<u>Club</u> , and mail to	: Capital Carriages	PO Box 1373, Helena MT.
29024. Tour contacts	are: Wes Lintinger 406-43	1-6447 Tour/C	lub Treasurer Sharon	Rurrowe
ecclocks@msn.com or	Club Secretary Darrell B	eckstrom, 406-4	39-3821/mtbeckstror	n@gmail.com
Full refunds will be gi	ven to cancellations recei	ved before Septe	ember 1st. NOTE:	Registrants will make their
own loaging arrangem	ents. See lodging informa	tion on the acco	mmodatione nage	
Your registration inc	ludes a tour train ride Fi	ciday at 4:30 pm	n. will von he attend	ling? *YesNo
		75	1 1100 5011 1100	and the state of t
Are you willing to jud	lge vehicles? YesNo	OTT-Sect of Particularies.	Judge Costumes?	Yes NoNo
Are you having your	car judged? YesNo_	Are you h	aving your costume	judged? Yes No
saturday evening banq	uet will be a roast sirloin	of beef and roas	st turkey buffet. If ye	ou have special needs diet,
nease indicate. Specia	al Diet:	a Principal State and Application and Applications and Ap		
Ing ramily and gues	or nereby release and ho	ld harmless Cap	pital Carriages Car	Club, Montana Pioneer &
thornian that minted	its officers and members	from any liabilit	ty, damage, injury, to	osses, or claims personal or
unciwise, mai might b	e incurred or arise out of,	or in connection	1 with, this event T:	affirm that my possessions
re covered by an nece	ssary property damage/lia	bility insurance.		
unnlicant's signature.			observe to	
applicant's signature: _			Date:	