

PARTICIPANT REGISTRATION FORM

All years, makes and models welcome



Hosted by Collingswood Partners, Inc.

856-858-9275

For more information visit www.collingswood.com
e-mail tseeley@collingswood.com or mail your registration form to
Cruise Night, 678 Haddon Avenue, Collingswood, NJ 08108

Clearly fill out the information below. Valid registration and insurance card subject to inspection.

2017 Event Dates: Third Thursday of Each Month
April 20, May 18, June 15, July 20, Aug 17, Sept 21, Oct 19

Registration: \$5 per vehicle, from 4:45-6:30pm at Collingswood Community Senior Center (30 W Collings Ave)

Showtime: 6-9pm **Award presentation:** 8pm

Vehicles must be off Haddon Ave by 9pm

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Year: _____

Make: _____

Model: _____

I hereby release Collingswood Borough, Collingswood Partners, Inc. and/or their agents, coordinators, sponsors and volunteers from any responsibility from any accidents and/or injuries to any person or any loss or damage to any participants's vehicle and/or motorcycle, person or property.

Signature: _____ Date: _____

COLLINGSWOOD
NEW JERSEY
It's Where You Want To Be

COLLINGSWOOD PARTNERS