

SNOWFLAKE PIONEER DAYS 2025 CAR SHOW REGISTRATION FORM

JULY 19, 2025

FREDERICKSON PARK, (106th W. 9th S.), Snowflake

REGISTRATION 8AM-10AM / SHOW 9AM-2PM / AWARDS 1PM

NAME _____

MAILING ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE () _____ **EMAIL** _____

VEHICLE MAKE _____ **MODEL** _____

YEAR _____ **COLOR** _____ **INTERESTING FACTS** _____

ENTRY CLASS # _____ **CAR CLUB AFFILIATIONS** _____

PRE-REGISTRATION \$30.00 DAY OF REGISTRATION \$40.00 LIMITED TO THE FIRST 100 NO REFUNDS
INCLUDES DASH PLAQUE AND T-SHIRT. INDICATE SHIRT SIZE: SML MED LRG X-LRG XXL XXXL

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|---------------------------------------|--------------------------------|
| 1. STREET ROD COUPE-ANY YEAR - ("AY") | 11. VINTAGE/ANTIQUE VEHICLE |
| 2. STREET ROD SEDAN - AY | 12. CAMAROS AND FIREBIRDS - AY |
| 3. T-BIRD / MUSTANG- AY | 13. OPEN ROADSTER - AY |
| 4. PRO STREET | 14. CORVETTE - AY |
| 5. CAR STOCK - AY | 15. STUDEBAKERS - AY |
| 6. CAR CUS/MOD | 16. OPEN CLASS |
| 7. MUSCLE CAR - AY | 17. FOREIGN MAKES |
| 8. TRUCK - AY | 18. VOLKSWAGEN - AY |
| 9. TRUCK CUS/MOD - AY | |
| 10. TRUCK 4X4 - AY | |

AWARDS: BEST OF SHOW, FIRST AND SECOND PLACE FOR EACH CATEGORY

**SPECIAL AWARDS: PEOPLE'S CHOICE (AS VOTED BY SPECTATORS), BEST INTERIOR, BEST PAINT, BEST ENGINE
LONGEST DISTANCE ENTRANT, BEST CLUB PARTICIPATION**

PARTICIPATION LIABILITY RELEASE--MUST BE SIGNED:

IN ACCEPTANCE OF THE RIGHT TO PARTICIPATE IN THE PIONEER DAY CAR SHOW, THE APPLICANT AGREES TO INDEMNIFY AND HOLD HARMLESS ALL PARTIES, AGENCIES AND ENTITIES, INCLUDING PROPERTY OWNERS, VOLUNTEERS, THE CHAMBER, THE TOWN OF SNOWFLAKE AND ANYONE ELSE CONNECTED WITH THE MANAGEMENT OR PRESENTATION OF THE PIONEER DAY CAR SHOW EVENT FROM AND AGAINST ALL LIABILITY OF CLAIMS, DEMANDS OR JUDGEMENTS ARISING AS A RESULT OF ANY LOSS OR INJURY THAT THE APPLICANT, GUEST OR FAMILY MEMBER MAY SUSTAIN OR INCUR DURING THE APPLICANT'S PARTICIPATION IN THE PIONEER DAY CAR SHOW EVENT. I CERTIFY THAT MY VEHICLE IS PROPERLY LICENSED AND SUFFICIENTLY INSURED TO MEET ALL LEGAL REQUIREMENTS OF LIABILITY.

SIGNED: _____ **DATE** _____

MAKE CHECKS PAYABLE TO: S/T CHAMBER OF COMMERCE, 113 N. MAIN ST., SNOWFLAKE, AZ. 85937

Office Use Only: Date Received _____ Payment Method _____ Amount _____