MATC SOUTH DAKOTA/BLACK HILLS TOUR

Sept. 4 – Sept. 16, 2018

REGISTRATION INSTRUCTIONS

Please complete the Registration Form as accurately and completely as you possibly can! If there are some areas where you may not have all the information enter TBD and provide the information ASAP. This will tell us that you are aware that you must provide this information when available. If you don't do this, we will return your registration form and your Mail in Date will be determined by the date of the second mailing of the completed form! This could affect you tour priority! Please read the form carefully and type or print legibly! Send your deposit check made out to MATC SOUTH DAKOTA/ BLACK TOUR 2018 with application to Larry Snuttjer, the Tour Coordinator.

THIS IS A "LIMITED PARTICIPATION TOUR" (35 cars), THEREFORE EARLY REGISTRATION ASSURES THAT YOU WILL BE ON THE TOUR AND AIDS US IN PLANNING SO PLEASE DON'T DELAY.

TOUR PAYMENT IS DUE WITH APPLICATION. The tour price is \$830.00 per couple (\$415.00 per person). All funds in US Dollars. If your cancel before May 1st you qualify for full refund. All hotel room reservations are on your own. When we receive you registration we will send you hotel information. Total cost of Hotels is \$1,422.91 plus tax. See our tour schedule sheet for more information.

Trip Cancellation insurance is NOT included in the Registration.

THE EARLIEST MAIL-IN DATE IS DECEMBER 1, 2017.

Read the Registration Form and instructions carefully. Fill in all information possible at this time (use "TBD" where necessary). Registrations will be returned if the following Critical information is missing!

Check missing or not signed;

Hold Harmless Agreement not signed by "all adults" in your car;

Car Information Missing.

YOU HAVE BEEN WARNED! WE DON'T WANT TO RETURN YOUR APPLICATION! IF THE TOUR IS FULLY BOOKED, YOU COULD LOSE YOUR PRIORITY!

QUESTIONS?

Contact: Larry Snuttjer 605-351-5385 or <u>lsnuttjer@gmail.com</u>

Glyndon Knutson 605-660-0492 or glyndonknutson@hotmail.com

CHILDREN REQUIRE SPECIAL FORMS. PLEASE COMPLETE APPROPRIATE INFORMATION FOR MINORS ON PAGE 4.

SAVE THIS PART FOR YOUR FUTURE REFERENCE AND MAKE PAYMENT AS INDICATED IN THE PAYMENT SCHEDULE ABOVE.

(Keep this page and the tour schedule. Mail completed pages 2-4 to the tour director)

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PART 1 - VEHICLE

Car: Ford			
(Year) (Body Style)	(License No.) (State)	(VIN)	
INSURANCE CO	POLICY NO	EXP. DATE	
OWNER (If driver doesn't own car)			
PAR	T II – DRIVER/OWNER		
NAME		(Exactly as on your drivers license)	
FIRST NAME YOU WANT ON YOUR E	BADGE		
ADDRESS			
PHONE_()	CELL _()	
DRIVERS LICENSE NO	STATE	EXP. DATE	
EMAIL			
EMERGENCY CONTACT AT HOME_		PHONE	
I ACKNOWLEDGE THERE IS NO TRIE	CANCELLATION INSUR	ANCE ON THIS TOUR.	
PA	ART III - PASSENGER		
NAME		(Exactly as on your drivers license)	
FIRST NAME YOU WANT ON YOUR	BADGE		
ADDRESS			
PHONE ()_	CELL_()	
DRIVERS LICENSE NO. (Only if you w	ill be driving)	STATE	
EXP. DATE		•	
EMAIL		_	
EMERGENCY CONTACT AT HOME_		PHONE	
I ACKNOWLEDGE THERE IS NO TRIE	w.		

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Every adult on the tour must sign the hold harmless (waiver) agreement. Every child must be covered by a signed agreement. Signing also acknowledges there is no Trip Cancellation Insurance.

THE EARLIEST MAIL-IN DATE (EMD) is December 1, 2017. Priority will be based on the EMD, DATE APPLICATION IS RECEIVED AND MEMBERSHIP STATUS. Regular Members first, followed by Inactive Members. All members have an advantage over non-members joining after this application is distributed.

Post-Date your check December 1 2017

Check Number

CHOOK I VAIII	1 oot Date your cheek December 1, 2017
Mail your Registr	ation Form with your check \$830.00 (USD) per couple made out to:
	MATC South Dakota/Black Hills Tour 2018
Mail to:	MATC South Dakota/Black Hills Tour 2018
	LARRY SNUTTJER
	27253 Regal Court
	Sioux Falls, SD 57108
(Don't FAX or en	mail your Registration Forms – date of mailing applies to check & form!)
Do not send by a	any service requiring signature for your package as they will delay receipt!
For tour coordin	nators use:
Mail Date Rec'd	
Hotel Info Mail	Date

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MODEL A FORD CLUB OF AMERICA
WAIVER, INDEMNIFICATION RELEASE AGREEMENT

IN CONSIDERATION OF BEING PERMITTED TO VOLUNTARILY PARTICIPATE (AT MY REQUEST) IN THE EVENT OF MODEL A FORD CLUB OF AMERICA ("MAFCA"), ITS CHAPTERS, AND/OR SPECIAL INTEREST GROUPS REFERRED TO BELOW ("EVENT"), THE UNDERSIGNED AGREE(S) TO THE FOLLOWING:

- 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE MAFCA, ITS CHAPTERS, REGIONS OR SPECIAL INTEREST GROUPS, THEIR EMPLOYEES, OFFICERS AND AGENTS ("Releasees") from all liability to the undersigned, his or her or their personal representatives, assigns, heirs, family members and next of kin ("Releasors") for any loss, damage, or claim therefore on account of injury to the person or property of the Releasors, whether caused by any negligent act or omission or other fault of the Releasees or otherwise while the undersigned is participating in the Event or using any of Releasees' facilities in connection with the Event.
- 2. THE RELEASORS HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS the Releasees from all liability, claims, demands, causes of action, charges, expenses, and attorney fees and all other costs resulting from involvement in the Event whether caused by any negligent act or omission or other fault of the Releasees or otherwise.
- 3. THE RELEASORS HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF PERSONAL OR BODILY INJURY, DEATH OR PROPERTY DAMAGE while upon Releasee property or participating in the Event or using any Releasee facilities and/or equipment whether caused by any negligent act or omission or other fault of Releasees or otherwise. The Releasors expressly agree that the foregoing release and waiver, indemnity agreement and assumption of risk are intended to be and shall be interpreted and applied as broad and inclusive as permitted by applicable law.

I ACKNOWLEDGE THAT I HAVE READ THE FOREGOING, THAT I AM VOLUNTARILY ENTERING INTO THIS AGREEMENT AND THAT I AM AWARE OF THE LEGAL CONSEQUENCES OF THIS AGREEMENT, including that it prevents me, my personal representatives, assigns, heirs, family members and next of kin from suing the Releasees if I am injured or damaged for any reason as a result of participation in the Event.

IF THE PARTICIPANT IS A MINOR, HIS OR HER CUSTODIAL PARENT OR LEGAL GUARDIAN MUST READ AND EXECUTE THIS AGREEMENT WHERE INDICATED BELOW. I hereby warrant and represent that I am the legal guardian or custodial parent of the minor named below, who is a minor, and agree, on my own and said minor's behalf to the terms and conditions of the foregoing agreement. I understand that I may talk to my legal advisor about this agreement and I have either done so or chosen not to. I understand that I have the right and have been given the opportunity to object to and bargain about the provisions of this agreement. I am voluntarily signing this agreement and intend it to be the unconditional release of all liability to the greatest extent allowed by applicable law.

BEFORE SIGNING, I HAVE CAREFULLY READ THIS ENTIRE AGREEMENT: If any accident, injury, death or damage to personal property occurs, you (by signing this agreement) will be giving up certain legal rights. If any part of this agreement is held invalid, the rest of the provisions shall remain in effect. If you do not understand anything in this agreement, you should not sign it and you should instead consult your legal advisor.

	Date	Date
Adult Participant Signature		Minor Participant Signature
Adult Participant Name (Printed)		Minor Participant Name (Printed)
	Date	Date
Adult Participant Signature		Parent/Guardian Signature
Adult Participant Name (printed)		Parent/Guardian Signature (Printed)

MAFCA/CHAPTER/SIG USE ONLY:

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