

REGISTRATION FORM

Barbecue, Wine Tasting and Fun Cruise Event

SATURDAY, FEBRUARY 15, 2025

Skipper's Name: _____ ACBS Membership#: _____

Name(s) of Additional Crew members: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

Boat Name: _____

Manufacturer & Model: _____

Length & Year: _____ Number of Passengers I Am Willing to Add to My Crew: _____

Registration Cost for Cruise, Lunch, and Pavilion

You may view the boats and cars on display without eating or drinking for no charge.

Food only @ \$30/per x _____ No. of people = \$ _____

Wine only @ \$11/per x _____ No. of people = \$ _____

Combo Food Wine \$41/per x _____ No. of people = \$ _____

Total Remitting = \$ _____

Please read and sign the following Liability Waiver:

For myself and any member of my family, including all minors who accompany me or should otherwise participate in the above named event, I hereby waive any claim for injury to my person, boat, or equipment. I agree to hold harmless the Sunnyland Chapter of the Antique and Classic Boat Society and any and all other sponsors of that event, their employees, agents, and volunteers and assistants for any injury or loss suffered by me, my family, or any invitee during or in connection with the above mentioned event, whether such injury or loss resulted directly or indirectly from the negligent acts or omissions of said sponsors, employees, volunteers, assistants or others connected with the above mentioned event. I understand that in order to participate in this event my boat must be adequately insured.

I am a member of HOFMARC British/Other Car Owner

Car Owner _____

Street Address: _____

City: _____ State: _____ Zip: _____

All Participants

Signature & Date: _____

Attach check (payable to Sunnyland Chapter ACBS) and Registration Form/Liability Waiver and mail by February 5th to Jack Bingham, 528 Reserve Dr., Tavares, FL 32778.