



24 • Mishawaka, Indiana

GRAND INDIANA AUTO TOUR • August 6–9, 2018

Hyatt Place • 215 West Day Road • Mishawaka, IN 46545 • phone 574-258-7777, then press 0
Room Rate \$101 per night (ask for GIAT) • Deadline for hotel registration is July 16, 2018.

PLEASE PRINT OR TYPE ALL INFORMATION

PARTICIPANT INFORMATION

Driver Name _____
Address _____
City _____ State _____ Zip _____
Phone (_____) _____
E-Mail _____
of Previous Grand Indiana Auto Tours? _____
All Participants Must Be Listed – Adults & Children
Passenger 1 _____
City _____ State _____ # Prev GIATs _____
Passenger 2 _____
City _____ State _____ # Prev GIATs _____
Passenger 3 _____
City _____ State _____ # Prev GIATs _____
Passenger 4 _____
City _____ State _____ # Prev GIATs _____
Are any of the above handicapped or require assistance? _____
Any dietary restrictions, vegetarian, etc? _____

Driver must be a member of VMCCA national club. Online application forms may be found at www.vmcca.org. Tour will be limited to vehicles 1993 and older. No modern replicas of old vehicles, modified or hot rods will be accepted. The vehicle may not display any advertising of a current nature. Registration closes July 16, 2018. No refunds for cancellation received after July 16, 2018.

VEHICLE INFORMATION

Year _____ Make _____
Body Style _____ Body Color _____

FEES AND OTHER CHARGES

Entry Fee (One Car and Driver)..... \$125.00
Passengers..... @ \$125.00 = \$ _____
Unisex Tour Shirts:
___ S ___ M ___ L ___ XL @ \$18.00 each = \$ _____
___ XXL @ \$20.00 each = \$ _____
___ XXXL @ \$21.00 each = \$ _____
TOTAL\$ _____

SAFETY RULES

Safety glass in all flat glass windows. The horn is operative.
The vehicle has and will have during the time of the tour: a fire extinguisher of adequate size, rated for at least B&C, and bearing the UL and/or OSHA seals of approval; all head lamps, turn signals and tail lamps of all descriptions are operative; all braking systems of the vehicle are in good working order and will stop the vehicle within the limits prescribed by the manufacturer at the time it was produced; the steering mechanism is functional and within the limits of the vehicle's performance when new.

I hereby agree to enter the vehicle described in the Veteran Motor Car Club of America, KYR, 2016 Grand Indiana Auto Tour. In consideration of the right to enter this event and for other valuable considerations, I (we) do hereby agree to indemnify, protect, defend and hold harmless The Veteran Motor Car Club of America and its Chapters and/or Regions, Officers and Representatives from and against any and all claims, costs, liabilities and attorneys' fees arising from damage or injury, actual or claimed, of any kind or nature, to property or persons, resulting from my (our) participation in the 2018 Grand Indiana Auto Tour (see page 2 for specifics).

The owner/driver has proof of bodily injury and property damage liability insurance on the entered vehicle in the amount of at least \$100,000 per person, \$300,000 per accident bodily injury liability and \$100,000 property damage liability, or \$300,000 combined single limit liability insurance.

Insurance Co. Name _____
Policy Number _____
Policy Term (Dates) _____ to _____

The owner/driver certifies that the described vehicle entered in this event has duly passed the requirements of the motor vehicle authorities, or other governing bodies of the state in which the vehicle is registered, and the vehicle shall be legally registered and/or licensed. The Veteran Motor Car Club of America and its representatives will not, and cannot, be held responsible for the "safety certification" of any participating vehicle.

Signed (Owner) _____
Driver (If Different) _____
Date _____

Make sure to make a copy of this form for your records. Then, please return this form with your check, made payable to Grand Indiana Auto Tour and mail to:
Mary Jo Siney
626 Wilson Boulevard
Mishawaka, IN 46545
574-259-6916

**GRAND INDIANA AUTO TOUR
WAIVER, INDEMNIFICATION RELEASE AGREEMENT**

IN CONSIDERATION OF BEING PERMITTED TO VOLUNTARILY PARTICIPATE (AT MY REQUEST) IN THE EVENT OF VMCCA ("VMCCA"), ITS CHAPTERS, REGIONS 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 VMCCA, 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 therefor 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.

Adult Participant Signature

Date: _____

Minor Participant Signature

Date: _____

Adult Participant Name (Printed)

Minor Participant Name (Printed)

Adult Participant Signature

Date: _____

Parent/Guardian Signature

Date: _____

Adult Participant Name (Printed)

Parent/Guardian Signature (Printed)

VMCCA/CHAPTER/REGION USE ONLY:

Event: _____ Date(s): _____