



Car Club Parkway Application

PLEASE PRINT

Name of Show or Event: _____

Car Club / Organization: _____

Contact Person Information

Full Name: _____

Mailing Address: _____

City / State / ZIP: _____ / _____ / _____

Daytime Phone #: _____ / Eve #: _____

Mobile or Pager #: _____ / Fax #: _____

Primary E-Mail: _____

Alternate E-Mail: _____

Additional Club Information

Club Full Name (for sign): _____

Marque or Type of Club: _____

Club Website Address: http://_____

Club E-Mail Address: _____

Name of Club President: _____

President's Phone #(s): _____ / _____

President's E-Mail: _____

Booth Information

- Single Table, 2 Chairs, ID Sign @ \$ 50.00
- Single Table, 2 Chairs plus space for One Car @ \$ 75.00
(Must meet fuel and safety requirements – less than 1/4th tank of gas, etc)
- Enclosed samples of any printed materials you will be distributing
- Enclosed list of items you will be selling (with prices)*
- Enclosed check #: _____ in the amount of: \$ _____
(payable to The Frederickson Classics)

Mail this form, specified materials and your check to:

The Frederickson Classics
P.O. Box 168
Kirkland, WA 98083

**Items subject to approval by show management.*